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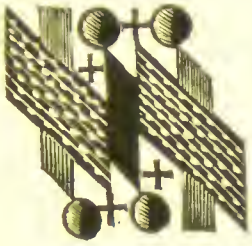
SCIENCE

ORGANON OF THE RATIONAL ART OF HEALING

BY SAMUEL HAHNEMANN · TRANSLATED BY C. E. WHEELER, M.D.

SAMUEL CHRISTIAN FRIEDRICH HAHNEMANN, born in Saxony in 1755. Lived in Leipzig from 1789 until 1821, when he was forced to leave on account of the hostility of the apothecaries. Lived in Cöthen, but later removed to Paris, where he continued his medical practice until his death in 1843.

ORGANON OF THE RATIONAL ART OF HEALING



SAMUEL HAHNEMANN

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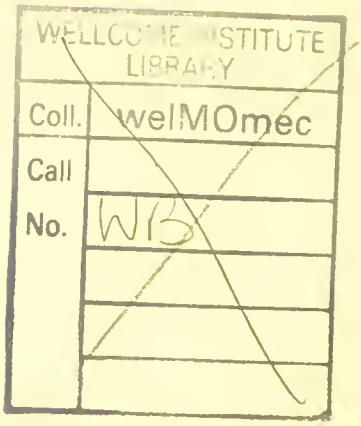

CONTENTS

PART I

PAGE

TRANSLATOR'S PREFACE ix

INTRODUCTION xi

AUTHOR'S PREFACE xxvii

TRANSLATOR'S NOTE xxviii

ORGANON OF THE RATIONAL ART OF HEALING . 1

PART II

PREFATORY NOTE 111

PROTECTION AGAINST INFECTION IN EPIDEMIC DISEASES 115

PLANS FOR ERADICATING A MALIGNANT FEVER . 126

SUGGESTIONS FOR THE PREVENTION OF EPIDEMICS IN GENERAL, ESPECIALLY IN TOWNS . . 141

ÆSCULAPIUS IN THE BALANCE 163

TRANSLATOR'S PREFACE

THE original suggestion that Hahnemann's Organon was worthy of a place in Everyman's Library came from the late Mr. James Speirs, and was supported by the British Homœopathic Association, of whose Council Mr. Speirs was a member. Mr. J. M. Dent looked favourably on the proposal, but was naturally anxious to make clear that the Organon is put forward here as a piece of history rather than as a contribution to polemics. For this reason the original edition of 1810 was selected for presentation, as it both constitutes a landmark in medical history and is less controversial than the later editions. The name of Robert Dudgeon is inevitably bound up with the rendering of Hahnemann's works into English, but inasmuch as Dr. Dudgeon worked from the latest and fullest edition, another translator had to be sought for this, the original edition. The association of Dr. Dudgeon with Hahnemann is maintained, however, in Part II of this volume, for the translations of the essays contained therein are from his pen. His version of the Organon has also been for me a court of appeal and constant help in difficulty, and it remains by far the most valuable record for any one

desirous to test the truth of Hahnemann's propositions.

In preparing my translation I have had the advantage of the co-operation of Mr. James Speirs, until his sudden and untimely death, and the invaluable assistance of my friend, Dr. T. Miller Neatby, M.A., who has constantly criticized the work both as physician and as writer, giving a value to this version which it would otherwise have lacked. To him I render my most hearty and grateful thanks: indeed, I am deeply conscious that his aid will count for no small proportion of any acceptance which this volume may win.

C. E. WHEELER.

35, *Queen Anne St., W.*
March, 27, 1913.

INTRODUCTION

THE ORGANON of Samuel Hahnemann is one of those books whose effect upon the world has been, in its intensity, out of all proportion to the extent to which its pages have been read. It is the foundation upon which the structure of Homœopathy has been built. Its successive editions (five in Hahnemann's lifetime) embodied the ripe experience and confident beliefs of its author, and old-fashioned as its phraseology sounds to-day, and out of date as many of its conceptions appear, it is not too much to say that the principles of Homœopathy, and even the most effective art of applying those principles, are expressed in the Organon in a way that might easily be modified in the phrasing, but must remain unaltered in the essence for any who wish to test this method of practical therapeutics. But the storm of anger and opposition that broke over Hahnemann and his method was the very worst atmosphere for the calm dispassionate enquiry which he eagerly desired, but which he and his followers have longed for in vain. Individuals have granted the enquiry (thus, indeed, has the system made its converts), but the Profession, never. Consequently less than five per cent. of the practitioners of medicine at any time have had even a remote acquaintance with the Organon, with the result that its undoubted effect has been exerted indirectly and Hahnemann has lost much honour that should have been his. The difference between the

orthodox medical practice to-day and the practice of a century ago (the first edition of the Organon appeared in 1810) is very great. Pasteur and Lister and their followers have revolutionized surgery, but the therapeutics of drugs (the sphere of Homœopathy) have also changed exceedingly, and practices like bleeding and blistering and drastic measures of that order have almost disappeared. Yet to Hahnemann's contemporaries these drastic procedures seemed the only way of salvation, and though founded on the wildest theories, which in their turn were supported by hardly a shred of evidence or experiment, they were yet persisted in with that blind optimistic confidence which has seldom been found lacking among the descendants of Æsculapius. Gradually from 1810 up to the present time the scene has changed, and although physicians still deplore the lack of method shown in giving medicines, and although many of the most famous of them express an almost universal scepticism of the value of drugs, they have at least learnt caution and the powers of recovery that belong to unaided Nature, and seldom to-day do they load the balance against the patient after the authentic fashion of their predecessors. The march of science, that is of exacter knowledge, through the century has counted for much in this change of attitude, but the influence of the constant presence of even the small minority of believers in Homœopathy has been a force that cannot be overlooked. While bleeding and salivation and purgation and drastic methods of counter-irritation were confidently proclaimed as essential to the treatment of disease, there was always after 1810 a remnant that refused these methods and demonstrated to all who would see

that patients recovered more surely and more speedily in the hands of those who used only minute doses of simple remedies.[1]

Granted that many cures attributed to Homœopathy may have been really due to natural powers of recovery working unhindered, what more damning indictment of the older methods could possibly be presented? If it be held (as many hold who admit the effectiveness of Homœopathy), that its work was purely to demonstrate the recuperative powers of Nature unimpeded by the physician, that negative achievement of Homœopathy would yet suffice to place the name of Hahnemann among those who have benefited mankind.

Therefore, as an historical work, the Organon may be offered to every man as a book of great interest, a book whose effects, negative and positive, have reached many to whom its contents have been unknown and to whom the name of its author has been only a synonym for crazy theorizing and unprofitable speculation. But there is another claim to attention which may be urged on behalf of the book, a claim that will be better realized if it is approached through a brief account of Hahnemann and of the nature of his work.

Hahnemann was born at Meissen in Saxony

[1] Of the superior results obtained by Homœopathy while the drastic means of treatment were still in popular use there can be no doubt whatever. Everywhere the official influence of the Profession was used to decry and suppress the heresy, and it was only through the conviction of state-governing bodies that Homœopathy's results were so good, that its adherents obtained leave to practise. The clause in the English Medical Act which ensures the status of Hahnemann's followers was directly due to the vastly superior results obtained by them in treating cholera in London.

in the year 1755. His parents, though poor, were filled with a sense of the value of knowledge and obtained for him such education as they could. By dint of great natural aptitude and diligence he made the most of the opportunities so obtained; and he was able, in process of time, not only to complete his medical studies and obtain his degree, but also to become an erudite man. His knowledge of languages was unusually extensive, including besides his native German, English, French, Italian, Greek, Latin, Hebrew, Arabic and Spanish. Therefore in all his voluminous studies of the medical wisdom of the past he was able to consult each author in his own tongue. But his bent was ever to science rather than to literature. He was deeply religious and the Bible has left its mark upon his style of writing; but there are few or no traces in his works of the great political and literary movements that synchronized with parts of his long life. The Organon exhibits a passionate desire for exact and clear statements, a desire which, at any rate to the English mind seems at times to conflict with the structural exigencies of the German tongue. Indeed, his desire for clarity leads him into repetitions which end in confusion, and the Organon is hardly to be recommended as a model of style. But throughout it is at least workmanlike, clear in thought, arduously painstaking and full of passionate conviction, yet withal moderate and argumentative through all its apparently dogmatic utterance. No unprejudiced person can rise from its perusal without a respect for Hahnemann, and what is true of the Organon in this respect is true of all the other writings of this great physician.

Up to the year 1790, that is until he was thirty-five, he worked at his profession and at other branches of science, especially at chemistry. In this last field he was responsible for much admirable work, and witness to his ability is furnished by the great Berzelius, who said of him, "The man might have been a great chemist": testimony the more to be valued as Berzelius had no fraction of interest in or sympathy with Hahnemann's medical opinions. As a physician Hahnemann was recognized by 1790 as one of the best in Germany. Hufeland, the leader of the German medical profession at this time, spoke thus of him, and retained a staunch regard for him and a high opinion of his abilities, though he never followed him into Homœopathy, nor even, as far as appears, submitted it to any practical examination.

As a physician Hahnemann made several most competent and valuable contributions to general medicine; among them may be specially mentioned his rational and humane teaching with regard to the treatment of the insane, and his practical hints on the management of epidemics, in both of which matters he was much in advance of his contemporaries and virtually anticipated all the modern points of view. But in spite of his standing in the world of medicine, he was profoundly dissatisfied with the art of medicine. The smallest knowledge of the treatment that was current and orthodox in his day is enough to explain his dissatisfaction, for dangerous practices were then deduced from almost baseless theories to an extent nearly incredible, and although Hahnemann's caution and sound sense kept him from the worst pitfalls, he was left in

the helpless state of having no alternative method to supply the place of all that his reason rejected. By 1790 he had almost withdrawn from practice and was earning his living by translating medical works. At this time he was engaged on Cullen's *Materia Medica*, and being dissatisfied with Cullen's explanation of the action of cinchona bark in relieving and curing ague, he took the scientific and rational course of personal experiment in order to test the matter. It is needless to state that the treatment of ague by cinchona was one of the few really satisfactory pieces of treatment in Hahnemann's day, and, not unnaturally, speculation was rife as to the reason of this definite curative relation between drug and disease. Hahnemann's experiment consisted in taking a large dose of cinchona bark while in good health and noting its effect upon his own healthy body. To his surprise he found reproduced upon himself all the chief phenomena (and even many of the minor symptoms) of a paroxysm of ague. When the attack passed off, a second dose produced a second paroxysm, and Hahnemann was presently face to face with the fact that this drug, which so often cured ague was capable of reproducing in his own healthy body the phenomena of ague. Like, in fact, cured like. Cinchona bark does not invariably produce this effect on the healthy, even in large doses, but the general truth of Hahnemann's observation, though sometimes questioned, has been amply confirmed; and Professor Lewin, the great German authority on Materia Medica, who has no leanings to Homœopathy, not only quotes this experiment of Hahnemann, but endorses it as illustrating a genuine result of the drug, and confirms it with similar

cases. There are always individual reactions to individual drugs, but it may be taken as established that cinchona bark tends, at any rate, to produce phenomena similar to those which it can cure, although the extent of the tendency varies in different experimenters.

This experiment was a ray of light to Hahnemann, for it suggested a possible clue to curative relations between drugs and cases of disease, a clue which he eagerly followed up. Those, and they are not a few, who are ignorant of his life and work, and yet brand him as a shallow, crackbrained dreamer or designing charlatan, are apt to think of him as rushing forth into the world with a complete system of medicine erected on the foundation of one doubtful experiment. The truth is far other than this. As soon as the cinchona experiment suggested to Hahnemann the possibility that the principle of like to like might prove a general Law of Healing, he began a systematic study of the records of medicine in the search for instances. He soon found numbers, many of which were mentioned in a preface to the Organon, which in this edition is summarized shortly, as its interest is technical and professional only. But over and over again Hahnemann found that a drug prescribed empirically had proved itself capable of curing conditions similar to those which it could produce. The records of medicine, in fact, gave plenty of encouragement to his now dawning belief that *similia similibus* was a genuine Law of Cure. But he did not neglect present experiment while searching out past experience. He returned to medical practice, and as opportunity offered he prescribed drugs for the diseases whose symptoms they could counterfeit, and

noted his results. Having interested a few friends in his experiments, he now began to lay the foundations of his vast work on Pure Materia Medica, his reason being that, in order to prescribe homœopathically, that is, on the basis of a similarity of symptoms between drug and disease, it is necessary to have a full knowledge of drug-symptoms. Such knowledge was largely to seek, because in spite of the work of a few previous experimenters like Haller and Stoerck, the effects of drugs upon the healthy, apart from cases (comparatively rare) of poisoning, could only be known from records of over-dosing in sickness, records wherein drug-symptoms and disease-symptoms were intermingled and confused. In order to gain a knowledge of pure drug action "provers" had to be enlisted, healthy and devoted persons who would take drugs in sufficient quantities to produce clear symptoms, and by recording these symptoms would begin the task of constructing clear symptom-pictures of remedies for comparison with the symptom-pictures of cases of disease. Hahnemann and a few of his friends attacked this herculean task and continued it year after year, until a mass of exact knowledge was available with regard to the effects of drugs such as had never existed before; knowledge which remains the more important part of the homœopathic Materia Medica, although a century of continued experiment and clinical experience has added to it and clarified it.

In research and in experiment six years passed, and in 1796 Hahnemann felt justified in publishing a first statement of his beliefs. This appeared in *Hufeland's Journal,* the leading medical periodical of that day. In the article

Hahnemann stated his theory, and adduced in its favour the evidence of the past as well as the results of experiment. While this article is the presentation of a case by a man who believes in it, it is not a dogmatic assertion so much as a plea for further experiment. The plea was denied, as virtually all the pleas of homœopathy to be tested before it is condemned have been denied. The first stirrings of the storm of obloquy and hatred which it was the fate of Homœopathy to rouse were already audible, but Hahnemann returned to his experiments undeterred. In 1805 appeared the first collection of drug symptoms, the forerunner of *Materia Medica Pura* which appeared in instalments between 1811 and 1827; and in 1806 another essay on the general theory of Homœopathy which formed a kind of preface to the Organon. Ten years more of unwearying experiment have passed by, and Hahnemann can at least claim that he has shrunk from no effort to establish the truth by the only means known to science, experiment and observation. But between 1796 and 1806 appeared various essays on points related to the law *similia similibus curentur* ("Let likes be treated with likes"), a law which after sixteen years of labour he felt justified in proclaiming. In 1801, for instance, appears the first hint of that practice which, more than any other, is associated in the mind of every man with Homœopathy, the practice of administering drugs in minute and, ultimately, in infinitesimal doses. Though to many this practice is of the essence of Homœopathy, it is, strictly speaking, an unessential addition to the central law. The law of Hahnemann and of Homœopathy governs only the choice of the remedy, and when a drug

is given to cure a disease the symptoms of which it can counterfeit when given to the healthy, then, consciously or unconsciously, Homœopathy is practised, be the doses large or small or infinitesimal. Unconscious Homœopathy is not uncommon, and instances now and then appear in orthodox journals. Seeing that by the homœopathic law drugs are chosen that act similarly to diseases, it would seem only reasonable to use them with caution lest the condition be aggravated, but the precise amount necessary for any particular case is a matter for the physician to decide from his own experience. Hahnemann and his followers appeal always to experience and experiment. They say in effect: "We have made certain experiments and we find a certain constant relation to exist between drugs and diseases. Of this we are so confident that we cannot admit an adverse opinion not founded on experiments equally painstaking. But among ourselves we find considerable divergences as to the best dosage for individual cases. Most of us have found drugs active in quantities minute or infinitesimal, but we can lay down as yet no law of dosage comparable to the law of selection of the remedy. We suspect that just as there is an *optimum* remedy for any given case, so there is an *optimum* dosage. Our experiments universally lead us to dosage much smaller than that customary with non-homœopathic physicians, but the exact range of it should, we think, be a matter of individual experience and experiment." This at least would sum up fairly the present position among homœopathists with regard to the question of the dose. It is entirely secondary to the choice of the remedy, and it is that choice and not the

amount of the drug actually administered that stamps a treatment as homœopathic.

In 1810 appeared the first edition of the work before us, *The Organon of Rational Medicine*, which is here translated as it stands, with the omission only of such notes as have a purely technical interest. Exactly twenty years of arduous experiment and close observation had passed since the first gleam of a possible law flashed on Hahnemann's mind. Right or wrong, at least he cannot be justly accused of haste or scanty consideration. All that he could do scientifically to test his case he has done, and he rightly speaks now with confidence and some scorn of any who should (and actually did) condemn his conclusions without any enquiry into those experimental bases upon which his conclusions rest. Although the first edition went off but slowly, five editions in all were published in Hahnemann's lifetime, and the work became and has remained the chief foundation-stone of Homœopathy. Hahnemann never ceased to observe and to test, and the later editions of the Organon contain a good deal of additional matter embodying his later experience, but nothing that conflicts with the essential principles laid down in the first edition. Especially he came to develop views concerning the origin of chronic diseases and the best method of treating them homœopathically, which modify some of the paragraphs here set forth and add a good deal of fresh material. With those views we have here little to do. The Organon is presented in this edition as a work of profound historical interest and value, not as a polemic in favour of a cause. Though a day should come when Hahnemann's views are proved

erroneous (and that day is not yet), the Organon would still retain an historical and personal interest which makes it unnecessary to preface it with any full controversial argument. It will suffice to say of Hahnemann's views on chronic diseases that although his theories have by no means found universal acceptance among his followers, the practice he founded upon them has proved itself of real value, and those who have accepted the theoretical basis and built their practice on it most definitely are generally those who have proved most successful in dealing with chronic diseases. In this, the first edition of the Organon, insistence is only laid upon the law of treating likes with likes. That is now, as then, the central law of Homœopathy to which the small dosage of remedies and the theories of chronic diseases are accessory but not essential. Hahnemann died in 1843 full of years, having won the enthusiastic respect and honour of a large number of the laity and the no less earnest hatred and scorn of most of his profession. Homœopathy has never been the faith of more than a small minority of medical men, but it has spread all over the world and can count its adherents and its hospitals and dispensaries everywhere. In Europe, inasmuch as the ban of official medicine has been published against it, and its followers have been denied all chance of holding teaching posts or influential positions, it has had to strive against great odds and make its way in the teeth of an opposition none the less powerful because founded chiefly on ignorance and prejudice. Still it has held its own and gained ground. Governments have refused to join in the professional attack upon it, and although in Europe

there are no homœopathic schools, and although every convert has to be won from the ranks of those who have been officially taught to regard it as folly or charlatanism, still it makes its converts. The minority hold to it because they have tested its claims and found them valid. The majority decry it because (in almost every case) they have little or no knowledge even of its aims, and still less experience of its practical application. In America, less hampered by tradition, it has had a fairer field, and though even there the faith of a minority, it nevertheless numbers its doctors by the thousand and possesses its own schools and colleges.

General medical science has enormously advanced since the days of Hahnemann, for, thanks mainly to Pasteur and Lister, surgery is a great beneficent force, and although leaders of medicine still bewail the lack of exact therapeutic methods, yet their art is now fairly free from the reproach of doing active harm. The early results of Homœopathy were contrasted with the results of men whose methods were dangerously drastic, while modern medicine is sceptical of its power to heal, but careful not to hurt, and this is a great gain. Homœopathy as an art is concerned only with the use of drugs in diseases. All that pertains to surgery and to the accessory branches of medicine is as much within the power of the followers of Hahnemann as of any others, and they have not been slow to avail themselves of these gains of knowledge. But they retain the faith that, in the sphere of the application of drugs to diseases, the law of similars is a weapon potent to relieve and cure with swiftness and certainty whenever its indications are clear. Moreover, certain advances

of modern science give them confidence that they have in Homœopathy a genuine law of tissue reaction. For the study of protoplasm has led to the formulation of certain biological laws, universally accepted, concerning its reaction to stimuli; and the fundamental law of such reactions applying to all stimulating agents, whether chemical (as *e. g.* drugs), electrical, mechanical or other is that the same agent which in relatively large doses can damage or destroy life activity, can in a relatively smaller dose stimulate it. Whence it follows that if by experimenting with drugs upon the healthy we have learned the tissues which these agents have it in their power to injure (and we deduce this from the symptoms exhibited), and if we find these same tissues manifesting by similar symptoms the injurious effects of disease, then we can confidently administer *small* doses of the drugs which we have independently found to have the power of damaging those tissues, knowing that the *small* dose will act as a stimulus to those very cells that need a stimulus; and this is to all intents the homœopathic law. This approximation to the law has been worked out by biologists untainted with the heresies of Hahnemann, and has led at least one distinguished teacher of Materia Medica, Professor Hugo Schulz of Greifswald, to conclusions which he is sufficiently open-minded to admit resemble those of Homœopathy. This admission has prevented most of his orthodox colleagues from studying his work and has brought a certain amount of obloquy on his head.

But now Bacteriology (which was a sealed book to Hahnemann, though he gained a prescient glimpse of some at least of its contents

when he met with cholera) comes upon the scene to make a practical application of these biological laws, and from them to develop the modern "vaccine" treatment. This treatment is founded upon the observed facts first that certain microscopic organisms (bacteria) are by their multiplication in the body the specific agents of certain diseases; second, that the body elaborates specific defences and offences by which to resist and overcome them; and third that when this defensive and offensive mechanism is insufficient it can often be stimulated to sufficiency by the administration of a remedy manufactured by growing the specific causal germ or germs outside the body, and from these "cultures" making a preparation known as a vaccine. In other words the germ (somewhat modified) is the remedy for the disease that the germ itself produces. And if this is not Homœopathy it is difficult to know by what other name to call it. The growth and success of vaccine treatment has actually been a great encouragement to homœopathists, and many great bacteriologists have in recent years come to speak with less acerbity of Homœopathy, and the general professional bitterness has largely abated. Add to this the newest theories of physics and the discovery of the powers of radium, which render the action of the infinitesimal at least more credible, and it must be admitted that the lapse of a hundred years has made the fundamental dogma of the Organon not less, but more deserving of the test of experiment. Enormously as some of the great scourges of mankind have been brought under control, there are few inhabitants of the civilized world that are not at one time or other in need of a physician. It

concerns every man that no avenue of possible help should be left unexplored. Now it is undeniable that from a variety of reasons, easily explicable, the theories of the Organon and the practice founded on them have not received the bare justice of a satisfactory testing. In the main the few who have tested them have come to believe in them, and have been willing to endure ostracism and ill-will for their faith, but the many have been content with a scornful denial of statements which they have never troubled to investigate. There is no room here for a consideration of personal rights and wrongs; the issues of life and death, health and disease, are too grave. It would not be worth while to perpetuate a difference even in order to win justice for Hahnemann as neither dreamer nor charlatan, but a great physician. But until this possible source of strength to medicine is amply tested and once for all confirmed or disproved there must be an uneasy feeling of a possible waste of power and some smouldering rancour and ill-will. There is no adequate test but that of personal experiment, patient and oft-repeated, but before experiment must come curiosity and a desire for conviction positive or negative. This curiosity and this desire hardly exist, but no one sufficiently scientific to avoid prejudice could read the Organon without first wondering and then testing. Out of the multiplication of experiments should come at last a full and fair conviction.

AUTHOR'S PREFACE

Truth for which all the eager world is fain,
Which makes us happy, lies for evermore
Not buried deep but lightly covered o'er,
By the wise Hand that destined it for men.

GELLERT.

THE testimony of all ages is in nothing more unanimous than in maintaining that the art of healing is an art of conjecture (*ars conjecturalis*): no art therefore has less right to refuse a searching enquiry into the soundness of its basis than this art upon which health, the dearest earthly possession of man, is founded.

I count it to my credit that in recent days I have been alone in subjecting it to a serious impartial investigation, and that I have laid before the world in signed or anonymous publications the convictions which have resulted therefrom.

Through this enquiry I found the road to truth, upon which I have to tread alone, a road far removed from the common highway of medical routine. The further I advanced from truth to truth, the further did my conclusions move from that ancient structure which, having been built out of opinion, is now only maintained by opinion, although I allowed no single one of my conclusions to stand unless fully confirmed by experiment.

The results of these convictions are stated in this book. It remains to be seen whether physicians who intend to deal fairly with their

consciences and with humanity can open their eyes to the health-giving truth, or whether they will continue to abide by their baleful tissue of arbitrary conjectures.

This warning at least I would give at the beginning, that indolence, desire for ease, and obstinacy make service at the altar of truth impossible, and that only freedom from prejudice and tireless zeal avail for the most holy of the endeavours of mankind, the practice of the true art of healing. But the physician who works in this spirit follows close after God, the Creator of the world, whose creatures he helps to uphold, and whose approval makes his heart thrice blessed.

TRANSLATOR'S NOTE

In the original edition, between the preface and the body of the work, Hahnemann inserted an introduction, devoted mainly to a record of applications of the homœopathic law made unconsciously by other physicians and recorded by them. This introduction is therefore mainly of a technical interest and is here omitted, but some idea of the care and thoroughness of Hahnemann's investigations can be formed from the fact that he quotes nearly two hundred and fifty instances of unconscious Homœopathy, most of them not isolated cases, but records of repeated experiences; and supports them by the evidence of no fewer than four hundred and forty physicians mentioned by name, with a reference to the source from which each opinion is derived.

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ORGANON OF
THE RATIONAL ART OF HEALING

BY

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TOGETHER WITH

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I

ORGANON OF THE RATIONAL ART OF HEALING, ACCORDING TO THE LAWS OF HOMŒOPATHY.

1

THE physician has no higher aim than to make sick folk well, to pursue what is called the Art of Healing.

2

The highest ideal of cure is the speedy, gentle and enduring restoration of health, or the removal and annihilation of disease in its entirety, by the quickest, most trustworthy, and least harmful way, according to *principles* that can readily be understood, (the Rational Art of Healing).

3

If the physician clearly perceives what it is in disease in general and in each case of disease in particular that has to be cured (knowledge of disease, knowledge of the requirements of disease or disease-indications): if he clearly perceives what is the healing principle in medicine generally and in each medicine in particular (knowledge of the powers of medicines): if in the light of clear principles he can so adapt the healing virtue of the drug to the illness that is to be cured that recovery must follow, and if he

has the ability not only to select the particular remedy whose mode of action is most suitable for the case (choice of the remedy or indicated medicine), but also to choose the exact quantity of the remedy required (the suitable dose) and the fitting period for its repetition, if, I say, he knows all these things and in addition recognizes in every case the hindrances to lasting recovery and can remove them, *then truly he understands how to build up his work on an adequate basis of reason, and he is a rational practitioner of the healing art.*

4

He is also a maintainer of health, if he knows the causes that may disturb health and excite disease and how to remove them from healthy persons.

5

It may be granted that every disease must depend upon an alteration in the inner working of the human organism. This disease can only be mentally conceived through its outward signs and all that these signs reveal; *in no way whatever can the disease itself be recognized.*

6

The invisible disease producing alteration in the inward man together with the visible alteration in health (the sum of the symptoms) make up that which is called disease: both together actually constitute the disease.

Author's note.—Therefore I do not know how that morbid change in the Inward of the body which occurs in disease could have been regarded as a thing existing by itself and outside

the disease, as a condition of the disease, as its inner, immediate primal cause (*prima causa*).

A thing or a condition demands a first proximate cause only in order to come into existence; where the thing or condition actually exists it requires no further originating, no first and proximate cause, for its continued existence.

Thus a disease, once established, endures independently of its proximate, exciting, primal cause: endures without further need of its cause: endures even if its cause no longer exists. How, then, can the removal of the cause be held to be the principal condition of the cure of the disease? It is impossible that the primal cause of its flight should cleave to a flying bullet, and the alteration which we can perceive in it is only an altered kind of existence—an altered state, and it would be more than absurd to maintain that this state could not be fundamentally removed, that this bullet could not be brought again to rest, except by an investigation into the *prima causa* of its flight and then by the removal of the *prima causa* thus metaphysically ascertained, or as (others would express it) by the removal of those alterations in the inner being of the bullet upon which its flight is dependent.

In no wise! A single impulse of equal power exactly opposed to the flight of the bullet, brings it at once to rest, without impossible metaphysical inquirings into the inner being of the bullet in flight.

All that we need to know are the symptoms of the flight of this bullet, that is to say the force and the direction of its motion, in order to set against it a counter-force of equal strength in a direction exactly opposed, and so at once compel it to immobility.

This is also (it may be said in passing) an example of the way in which alterations can naturally be made in abnormal conditions of physical things, namely, through their exact opposites. Thus boiling water can be swiftly reduced to a moderate temperature by the addition of a certain quantity of snow; an acid loses its acidity and becomes a neutral salt through the action of an opposing alkali; the over-stretched material strives to contract; the compressed to expand; the over-dry substance to absorb moisture from the air, and so on; and in this way most alterations of abnormal conditions in the physical world are effected by Nature by means of their opposites. But the living organism of animals must obey widely different laws for the removal of the altered condition which is the result of disease; here the law of opposites which is adapted to the alteration of non-living physical nature is of no avail.

7

There must be a curative principle present in medicine; reason divines as much. But its inner nature is in no way to be perceived by us: its mode of expression and its outward effects alone can be judged by experience.

8

The unprejudiced observer, knowing the worthlessness of abstract speculation which cannot be confirmed by experience, is unable, however acute he may be, to take note of anything in any single case of disease, except the changes in the condition of the body and soul which are perceptible by the senses, the so-called disease phenomena, symptoms in fact; in other words,

he can note only such fallings away from a former state of health as are recognizable by the patient himself, the friends in attendance, and the physician. All these perceptible signs make up together the picture of the disease.

9

As, then, in disease there is nothing to lay hold of except these phenomena, the disease can be only related to the required remedy through the symptoms, by means of which, in fact, it both makes known the need of the patient for help and points to the kind of help that is required. And thus this symptom-complex, this outward reflection, which is a representation of the inward being of the illness, is the only means whereby it is possible to discover a remedy for it, the only means which can indicate the most appropriate agent of cure.

10

A disease in its whole range is represented only by the complex of morbid symptoms.

Author's note.—1. All exact observation teaches that a serious illness requiring treatment practically never consists of one single symptom, and that a single serious symptom seldom if ever occurs alone. Almost always there are several notable signs of disease and deviations from the normal health simultaneously present in the patient, which make up the unity of the morbid condition, however little at first sight some of them seem to be related to one another. A single slight symptom is not an illness calling for treatment.

Author's note.—2. Formerly physicians, not knowing how otherwise to render help in cases of disease, sought to combat by remedies one

single symptom out of several and if possible to suppress it—a one-sided proceeding which under the name of "symptomatic treatment" has justly aroused general condemnation, because thereby not only was no benefit gained, but much damage was inflicted. One single symptom is no more the actual disease than one foot is the whole man.

11

It is not conceivable, nor can any experience in the world establish it, that there should remain, or could remain, anything but a state of health when all the symptoms of disease (the whole complex of perceptible phenomena) are removed, or that the disease-causing alteration in the inward of the organism should in that event continue unextinguished.

12

The invisible disease-producing change in the inward man and the complex of outwardly perceptible symptoms are consequently determined by one another reciprocally and inevitably; both together make up the disease in its entirety, that is, constitute such a unity that the latter must stand or fall simultaneously with the former, that they must exist together and disappear together, so that whatsoever is able to call out a group of definite symptoms, must have caused in the body that corresponding inward morbid change which is inseparable from the outward appearances of disease. Otherwise the appearance of the symptoms would be impossible: and similarly whatever removes permanently the complex of outward signs of disease must simultaneously have removed the inward morbid change, because the banishing of the former

without the disappearance of the latter is inconceivable.

Author's note.—A foreboding dream, a superstitious fancy, a solemn prophecy that death must infallibly occur on a certain day and at a certain hour, have not seldom produced all the symptoms of commencing and progressive illness and of approaching death and have even caused death itself at the hour predicted. Now this would not have been possible without the simultaneous setting in motion of an inward change corresponding to the outward and visible symptoms; hence in such cases all the signs of approaching death have frequently been dispelled, and a state of health suddenly restored, by some skilful deception or contrary conviction, and this again could not occur without the removal of the inward alteration which was threatening life.

13

Now since, when cure is effected through the removal of the whole range of the perceptible signs and symptoms, the inward change which caused the symptoms is also removed (that is, the totality of the disease), it follows that the physician has only to clear away the entire symptom-complex in order also to get rid of the inward alteration—in other words, to remove the whole disease, the disease itself, a feat which must always be the only aim of the rational healer; for the essence of the art of medicine consists in compassing the restoration of health, not in searching for the change in the inward and hidden things, a quest which can tend to nothing but fruitless speculation.

Author's note.—It is only through a misuse of the desire to reach the eternal, sown in the

spirit of man for nobler purposes, that these impudent attempts have been made upon the realm of the impossible, those speculative broodings over the essential nature of the medicinal powers of drugs, over vitality, over the inner invisible working of the organism in health and over the changes of this hidden inner working which constitute disease—in other words, over the inner nature and essence of illness.

All that mankind has apprehended of animal magnetism, galvanism, electricity, attraction and repulsion, earth magnetism, caloric, phenomena of gases, and other objects of chemical and physical enquiry, is far, far wide of the comprehensive, clear, and fruitful explanation of even the smallest function in the living organism, whether healthy or diseased. What innumerable unknown powers and their laws may be involved in the regulation of the living organs, powers and laws of which we know nothing and for whose recognition we should need infinitely more and infinitely finer senses than we have! When the physician maintains that research into such things is necessary, then he shows a misconception of the capacities of men and a misunderstanding of the requisites for the work of healing.

The more that profound intelligences devoted themselves to this "research into the secrets of Nature," the more did fruitless hypotheses come to birth, full of contradictions. All history teaches this, and so also teaches the judgment of the best informed among healthy minds.

If only it had served the practice of medicine in the slightest degree—if all this subtle investigation had revealed the true remedy for the least of diseases, it might yet pass for desirable!

Listen to the wise and upright Sydenham:

"Quantulacumque in hoc scientiæ genere accessio etsi nil magnificentius quam odontalgiæ aut clavorum pedibus innascentium curationem, edoceat longe maximi facienda est, prae inani subtilium speculationum pompa,- quae fortasse medico ad abigendos morbos non magis ex usu futura est, quam architecto ad construendos ædes musicæ artis peritia."

Yet behold! All imaginable theories concerning the functions, the inner form, and composition of the living brain in health and in disease, all the countless speculations concerning the nature of inflammation, all hypotheses as to the nature of water and caloric, never availed, in the world's history, to furnish a hint or an indication of the specific remedy for the phrenitis caused by sunstroke! Löffler discovered it accidentally to consist in sprinkling the skin with hot water, and the rational (homœopathic) system of medicine can easily and swiftly by its simple laws find this and other specific remedies, without metaphysical racking of the brains and without the need of waiting for the happy chance which may be delayed for a thousand years.

14

Inasmuch, then, as in disease nothing that expresses the need for assistance can be discovered by observation except the complex of symptoms, it follows that it is precisely the totality of the perceptible symptoms, and that alone which must afford the significant indication in disease for the selection of a remedy.

15

Again, since the healing principle of medicine cannot itself be actually perceived, and since in

pure experiments by the most acute observers nothing can be determined in drugs which constitutes them medicines except their power to bring about distinct changes in the health of the human body and to excite, especially in the healthy, various unmistakable symptoms of disease; it follows that, if medicines act as remedies, they only make known their inner healing principle and bring their remedial power into play through this ability to cause symptoms. And it follows also that, when we wish to decide which among several remedies is the most appropriate for any individual case of illness, we can put our confidence only in those disease-phenomena which medicines produce in healthy bodies; for these form the only evidence of their inherent tendency to cure.

16

If, then, disease has nothing to show by removal of which it can be changed into health, save the complex of its symptoms, and if, further, medicines can show nothing of their power of healing except their tendency to excite disease-symptoms, it follows that medicines, to be true remedies, must uproot and remove the symptoms of illness by the power of the symptoms which they themselves can excite.

17

If, now, experience should show (and indeed it does show) that a given disease-symptom is only removed by the very medicine which has produced a similar symptom in a healthy body, then it would be probable that this remedy is able to uproot that disease-symptom by virtue of its tendency to call forth a similar one.

18

If, further, it should be shown (and, indeed, this also is shown) that the very medicine which has given rise in a healthy body to all the symptoms shown by the illness which it is desired to cure, can remove by its medical use the whole complex of disease-symptoms (that is, the whole existing disease), and change the condition to one of health, then it cannot be doubted that the law has been discovered whereby this medicine has brought recovery to this disease, namely, the law: "Similar symptoms in the remedy remove similar symptoms in the disease."

19

Now as experience shows incontestably in regard to every remedy and every disease, that all remedies without exception cure swiftly, thoroughly and enduringly, the illnesses whose symptoms are of like order with their own, we are justified in asserting that *the healing power of medicines depends on the resemblance of their symptoms to the symptoms of disease:* or in other words, *every medicine which, among the symptoms which it can cause in a healthy body, reproduces most of those present in a given disease, is capable of curing that disease in the swiftest, most thorough, and most enduring fashion.*

20

This eternal, universal law of Nature, that every disease is destroyed and cured through the similar artificial disease which the appropriate remedy has the tendency to excite, rests on the following proposition: that only one disease can exist in the body at any one time,

and therefore one disease must yield to the other.

Author's note.—The few examples which have been brought forward to the contrary are all too much under suspicion of possible misinterpretation to be taken for clear and indubitable observations.

21

To every disease the organism reacts in a special and individual way. Since its nature is bound fast to unchanging laws of unity, it cannot react to a new disease or receive it unless indeed it ceases to react to the first disease. If the later disease is unable to remove the earlier and is forced upon the organism too long, then both combine to make a single third disease, which is called a complicated disease. These propositions are based on the following facts.

22

A natural [1] chronic disease present in the body resists the appearance of a new chronic disease, unless at least the later be a miasmatic or endemic disorder and the body remain unduly exposed to it over a considerable period of time. In such a case, as usually the two diseases are dissimilar, the later cannot extinguish the earlier homœopathically, and either the former, if it is a weaker disease, is suspended as long as the latter endures (as Schoepf saw an itching skin eruption disappear when the patient was attacked by scurvy, to return, however, after the scurvy was cured), or the two disorders combine into one so-called complicated disease; which, though complicated, always presents a single

[1] *I.e.* not artificial. See note to S. 25.

disease-picture, intermediate between the disease-pictures of the two disorders, and can be treated and cured homœopathically by the totality of the newly united symptom-complexes just like a simple disease. From the time of the second infection up to the time of the combination of both into a third single but complicated disease, the first infection is latent.

23

But incomparably more frequent than the blending and consequent complication of natural diseases, are the artificial disorders, produced when unsuitable remedial measures are applied for a long time to bodies attacked by chronic disease. For such remedial measures, having no impulse similar to that of the disease for which they are given, are unable to remove it and cure it homœopathically; but on the contrary they attack the body over a long period of time in a dissimilar way, and thus gradually bring about an inner reaction of a dissimilar kind, in short, an artificial chronic disease, which unites with the original chronic disease and so builds up a new monstrous disorder, a complicated malady, which is often of a very obstinate kind.

Author's note.—Many cases published in medical journals with requests for suggestions as to treatment are of this kind, as are also many chronic disease-histories related in medical works. Of a like order are the numerous cases where venereal disease is not cured by lengthy treatment with unsuitable preparations of mercury, but combines with chronic mercury-poisoning to make a horrible blend of complicated disease (masked venereal disease), which can now no longer be cured with mercury (the

remedy for syphilis), but must be treated with liver of sulphur (the remedy for mercurial poisoning).

24

If, on the other hand, when chronic disease is present, the patient is attacked with a new, more local, and therefore less severe disease, which has no resemblance to the first and therefore cannot cure it homœopathically, then usually the chronic disease is suspended as long as the local disorder endures.

25

If a long-standing chronic disease, whether natural or artificial, is present, it will, being the stronger, repel from the organism a new acute natural disease of a different kind, and often also an acute disorder artificially induced.

Translator's note.—Here and elsewhere Hahnemann means by artificial diseases those affections which are the result of drug-taking, or procedures like vaccination, or the use of blisters, setons or issues, all of which were very frequently and drastically used in his day. For instance, in a note to this aphorism he quotes Jenner as maintaining that rickets prevents vaccination from "taking," and that even regular coffee-drinking is apt to render vaccination ineffective. The former would be an instance of a natural chronic disease repelling an acute artificial disease, the latter of an artificial chronic disease (coffee-poisoning) having the same effect. Neither of Jenner's statements would be implicitly accepted to-day, but the effect of one disease on another is a subject upon which it is still difficult to dogmatize, and Hahnemann's general propositions seem to be borne out, at

any rate in some instances. In any case, in reading these and the next few aphorisms it is important to remember that Hahnemann is now seeking for an explanation of certain facts which he had observed concerning the relations between drugs and diseases. His explanations and his examples from natural diseases have not all the power of conviction which they seemed to have in his day, but the facts which these aphorisms attempt to explain remain founded on experiment and observation, and can only be confuted by further experiment and observation. Hahnemann claimed that "likes are the best means of treating likes." Only experiment can show whether this is a true statement, and if experiment confirms Hahnemann, we can doubt or reject his explanation as to the *modus operandi* of his law without impugning the law's validity.

26

But if, when the organism is suffering from a chronic illness, a new and acute disease attacks it and proves stronger than the first disease, but does not resemble it, then the chronic disorder gives rise to no symptoms (lies latent) while the acute disease runs its course, but reappears afterwards unchanged.

27

When the organism suffering from an acute disease becomes infected with another acute disease of a dissimilar kind, the disorder which is the weaker of the two gives way, but is not destroyed, only remaining latent until the stronger has run its course.

Author's note.—An eruption of measles will disappear as soon as small-pox papules become

visible, and when these are healed, the eruption of measles, latent till then, appears again and runs its ordinary course. I have seen the swelling in a case of parotitis (mumps) disappear when vaccination took effect, and only when the cow-pox had run its course did the swelling and fever characteristic of mumps reappear and run thereafter their usual course. Again, a case of scarlet fever with tonsillitis was interrupted and suspended for four days while cow-pox vesicles developed (Jenner).

28

But if, on the contrary, an acute infection attacks an organism already suffering from a similar acute disease, then the stronger infection uproots the weaker entirely and removes it homœopathically.

29

Two acute diseases meeting in the same organism never blend into one; the cases hitherto cited in evidence are only apparent examples of such a fusion.

30

Further, if a chronic disease is already present, and a very similar acute disorder attacks the patient, the chronic disease is destroyed by the acute and homœopathically cured.

Author's note.—Leroy saw a very chronic and obstinate ophthalmia in a boy disappear permanently after an attack of small-pox, a disease which has itself the power to cause violent inflammation of the eyes.

An obstinate ophthalmia was cured by Dezo-

teux by inoculation of small-pox. Other similar cases have been observed.

31

The great homœopathic Law of Cure rests on this law of man's nature, revealed by experience, that diseases are only destroyed and cured by similar diseases. The homœopathic law may be thus formulated: that a disease can only be destroyed and cured by a remedy which has the tendency to produce a similar disease, for the effects of drugs are in themselves no other than artificial diseases.

32

The tincture of an ounce of cinchona-bark mixed with a couple of pounds of water and swallowed in the course of twenty-four hours will certainly produce a cinchona fever of several days' duration. A warm foot-bath of an arsenical solution or the application of an arsenical ointment to the scalp [1] will no less certainly bring about an arsenical fever lasting at least a fortnight, than residence in a marshy district in autumn will cause intermittent fever. A girdle of mercurial plaster round the loins will cause mercurial poisoning no less quickly and surely than wearing the shirt of a person affected with the itch will produce an attack of the itch. A strong infusion of elder flowers or a few berries of belladonna are just as much disease-producing

[1] Arsenic in Hahnemann's day was used in doses which now seem terrifying, and most preparations of it were far stronger than any now employed. Symptoms of arsenical poisoning would not be produced by the external use of modern pharmacopœial preparations except in patients of extraordinary susceptibility to the drug.

forces as inoculated vaccine-matter, or a viper-bite, or a great shock, and every one of these influences, just because it has the power to produce disease, can become a remedy and a force to counteract disease, as soon as it is opposed to a similar disorder already existing in the body. So that all that we call medicine is no other than the power to produce disease, and all true remedies are no other than substances capable of arousing in the organism an artificial disease similar to the natural disease which it is thereby able to destroy and to remove.

33

When, by the laws of rational therapeutics we have found the medicine which is best adapted for curing a given disease and have applied it as a remedy, it is clear that the sick organism is, as it were, inoculated with a new disease (counter-disease) by virtue of the disease-force in the drug; but it must be owned that this artificial counter-disease possesses unusual advantages over all natural counter-diseases.

34

The invisible influences whereby the ordinary diseases of mankind are produced are all too little known, and are all too little under our command, for us to use them for the production of diseases at our will, and thus as remedies against diseases of longer standing.

Translator's note.—The "influences" invisible to Hahnemann are many of them visible enough to-day in bacteriological laboratories, and are used as remedies in a way quite comparable to that which Hahnemann suggests in this and the following paragraphs.

35

Even the miasms, which might conceivably be inoculated for the removal of certain diseases, are too few in number to be used even to a limited extent as remedies.

Translator's note.—In these days before bacteriology, a miasm corresponded to what would now be called a bacterial disease. Years afterwards, when Hahnemann came in contact with cholera, he conceived the agent of that disease to consist of "animalculæ" invisible to any means of sight that science then possessed, and his suggested rules for dealing with epidemics are not only extraordinarily sound, but owe their soundness to the fact that Hahnemann's conception of the mode of transmission of infection was not far from the truth.

36

Even if we were able to produce various natural diseases artificially and at will, they are either not sufficiently analogous to the disease under treatment, and therefore not helpful, or they are of longer duration than the original disorder, and hence, even when they have overcome it, they frequently remain a considerable time in the body, seldom disappear of themselves, and usually require artificial remedies before they are defeated and finally removed.

37

On the other hand, the disease-producing powers usually termed "drugs" or "medicines" can be used for purposes of cure, with infinitely greater ease, far more certainty and with a range of choice almost unlimited; we can give to the

counter-disease thereby aroused (which is to remove the natural disease that we are called to treat) a regulated strength and duration, because the size and weight of the dose lies at our command; and as every medicine differs from every other and possesses a wide range of action, we have in the great multitude of drugs an unlimited number of artificial diseases ready to hand, which we can oppose with decisive choice to the natural course of the diseases and infirmities of mankind, and so, swiftly and surely, remove and extinguish natural disorders by means of very similar diseases artificially produced.

38

As it is now no longer doubtful that the diseases of men consist merely of certain groups of definite symptoms, and may be destroyed and changed into health (which is the order of proceeding in all genuine cures) by a medicine truly, but only by such a medicine as can artificially excite similar disease-symptoms, it follows that the art of cure is comprised in finding an answer to these three questions—

1. How can the physician discover what he needs to know of the disease in order to cure it?

2. How can he discover the individual disease-producing powers of medicines which are to act as counter-diseases for the cure of natural diseases?

3. How can he most efficiently turn these artificial disease-producing powers (medicines) to account for the cure of natural diseases?

39

As to the first point, the enormous number and variety of diseases might easily persuade us

into a conviction that they cannot possibly be individually considered or even retained in the memory; and that they cannot be cured unless a comprehensive survey be first made of them and a separation effected, (upon the basis of certain common characteristics,) into a few small classes, each of which may then with comparative ease be treated as one disease by a common method.

40

Diseases, infirmities and illnesses present, however, appearances so endlessly various that such a forcible grouping into separate divisions, however apparently necessary, can hardly serve any useful purpose from the point of view of cure.

41

The division of diseases into general and local seems to have been commonly observed.

42

But the human body is, in its living state, a unity, a complete and rounded whole. Every sensation, every manifestation of force, every inter-relation of the material of one part, is intimately concerned with the sensation, force-manifestations and inter-relations of all the other parts; no part can suffer without involving all the rest in suffering (greater or less) and in alteration.

43

This oneness of life forbids the idea that any bodily disease can remain completely and absolutely local so long as it is not confined to a part of the body entirely shut off from all the rest. The remainder of the system simultaneously suffers more or less, and betrays its suffering in

this or that symptom. Every powerful medicine produces amongst other actions an effect upon a disease apparently local, even when applied to a distant part or taken internally, and the remedy specifically fitted for the general disease (of which the local manifestation is always but a part or symptom) relieves also the local affection which is far removed and apparently isolated.

44

A second division of diseases into febrile and afebrile, though highly esteemed, labours under a similar disadvantage. There is no general agreement as to which characteristic signs and symptoms should be included in the definition of fever, and which should be rejected; and among the greater number of theories and definitions of fever there is none that does not include symptoms which are also found more or less in diseases which are universally considered among the most afebrile. The most febrile pass over into the most afebrile by imperceptible degrees, a fact which shows that a sharp division between the two is only artificial and not natural.

Translator's note.—Hahnemann wrote long before the days of clinical thermometers. But even with that absolute means of estimating fever, the presence or absence of a rise of temperature would still by itself be an insufficient basis for the classification of diseases.

45

The nomenclature or classification of the countless varieties of disease, even if it could be accomplished with tolerable accuracy and completeness, would serve the physician only as a natural historian, in the way that the classi-

fication of other natural phenomena and natural objects is of value in general natural history. In other words, it would aid his historical perception by means of a tabulated and ordered survey. But for the physician as a practitioner of the art of medicine it would be of no value whatever. For the true art of treating disease cannot rest content with such simple one-sided resemblances as suffice for the classification of diseases into genera and species. On the contrary, it must make the most complete survey of every single case of disease that comes to be treated before it can select the remedy exactly suitable thereto, that is, before it can deservedly be called a well-founded and rational art of cure.

Translator's note.—Increased knowledge of the outside causes of disease, such as is afforded by bacteriology and the allied sciences, has now given at least a partial classification of the greatest value to the physician, both in the prevention of disease and in the diagnosis and prognosis of individual cases. But it still remains as true as when Hahnemann insisted on it, that the treatment of each case must be an individual treatment, and such classifications as were possible a century ago only tended to obscure that fundamental fact with which the physician has always to reckon.

46

Nature has no nomenclature or classification of disease. She produces individual diseases, and insists that the true physician shall not treat in his brethren the systematic combination which makes up a *genus* of disease (a kind of confounding together of different diseases), but shall always treat the individuality of each

individual case of disease. And she forbids the therapeutic treatment of groups of diseases constructed merely in the imagination of men, for such treatment is a crippling of the divine work of healing; on the contrary, she enjoins the treatment of individual disease, which she has wisely created as distinct entities.

Author's note.—Huxham, deserving of honour for his acute insight no less than for his tender conscience, says (*Op. Phys. Med.*): "Nihil sane artem medicam pestiferum magis unquam irrepsit malum, quam generalia quaedam nomina morbis imponere, iisque aptare velle generalem quandam medicinam."

47

The rational nature of the art of medicine manifests itself pre-eminently in the rejection of all systematic and other prejudices, in the refusal to act without good grounds, in the adoption of every possible measure to achieve the desired action, and in confining attention as much as possible to that which can be definitely ascertained. Correspondingly the characteristic of the rational and thorough physician is, pre-eminently, attention to the divergences and differences of diseases, and also of drugs or, in other words, the careful investigation of the individual signs of every single disorder and of the individual mode of action of every single remedy.

48

Every disease epidemic in the world differs from every other, excepting only those few which are caused by a definite unchangeable miasm. Further, even every single case of epidemic and sporadic disease differs from every other, those

only excepted that belong to the collective diseases noted elsewhere. Therefore the rational physician will judge every case of illness brought under his care according to its individual characteristics. When he has investigated its individual features and noted all its signs and symptoms (for they exist in order to be noted), he will treat it according to its individuality (*i. e.* according to the particular group of symptoms it displays), with a suitable individual remedy.

Such a direct, unprejudiced and rational procedure will demonstrate wherein he differs from every physician who does not trouble to investigate the case of disease thoroughly, but (to suit his own convenience) generalizes regarding it, labels it according to the conjectural system which he affects, and models his treatment entirely on this conjecture.

49

Certain diseases are caused by a special agent of contagion (an individual miasm of a sufficiently definite kind), for instance, the plague of the Levant, small-pox, measles, true smooth scarlet fever, venereal disease, the itch of woolmakers, as well as rabies, whooping-cough, plica polonica, etc. These diseases seem to be so definitely distinguished in their course and character that, whenever they appear, they can be recognized by their persistent signs as old acquaintances. Therefore it is possible to give each of them a definite name and to attempt to establish for each of them a regular and staple method of treatment.

50

It may well be that there are yet other diseases attributable to a "miasm" which we cannot yet demonstrate, besides those that belong to certain

localities and climatic conditions and those that are endemic in certain scattered regions: *e. g.* autumnal marsh-fever, yellow fever, sea-scurvy, framboœsia (yaws), pellagra, etc. Further, there are a few diseases arising either from a single uniformly acting cause or from a combination of several definite causes acting simultaneously, which can readily be classed together to some extent, as, for instance, gout, and possibly also membranous croup and Miller's asthma. These diseases are little less deserving of their special names because the symptom-group remains tolerably constant, on the whole, for each of them, and therefore each is adapted to a definite and almost established treatment.

51

But the case is very different when we consider a number of other diseases probably arising from the concurrent effect of several pathogenic causes which do not unite in the same way for the production of the disorder. These diseases often differ from one another in regard to several important symptoms, and hence cannot ever be treated all with the same remedies.

To this class of disease belong the widely differing varieties of epilepsy, catalepsy, tetanus, chorea, pleurisy, phthisis, diabetes, angina pectoris, prosopalgia, dysentery, and other conditions represented by names which the schools have given to disease-states that often differ fundamentally and only resemble one another in a few symptoms. By maintaining an alleged identity it was possible to establish for them an identical treatment, but the very different results obtained by the pursuit of this method are alone enough to refute the supposed identity of disease

upon which the method is founded. As collective names they may have a certain value, but none as the special names of identical disease-conditions: for then they lead the physician astray into a uniform empirical medicinal treatment, to the detriment of his patients.

Author's note.—Thus, for instance, there are several varieties of diabetes, that is, several diseases essentially different classed together under this one name. At the first casual glance they seem to resemble one another in one or more symptoms, but to maintain therefore that they represent cases of one and the same disease is erroneous. If the individual cases are carefully examined it will be found in almost every one of them that there are symptoms differing widely from those present in other cases, and symptoms present in some and absent in others. Even the urine often varies much in its character, although the inventors of the name diabetes attached a very great importance to their discovery of a special character therein; sometimes it passes rapidly into vinous or acetous fermentation, at other times it only becomes mouldy, and so forth. If one kind of diabetes can be cured with ammonium sulphate, many other kinds will fail to respond to this remedy. Alum would seem to be of advantage in a few cases, and again in others neither alum nor ammonium sulphate would appear to be of any use. How can these be cases of one disease which differ so much in their symptoms and require such varying treatment? These manifold disease-conditions may indeed be called *kinds of diabetes*, but not simply diabetes, lest the false impression be created by this name that they are all cases of one simple well-defined disorder. He who has cured one case of facial neuralgia with mercurial ointment will

soon find three or four cases for which this ointment will not in the least avail, although he will call them all by the same name. If each of these names only stood for diseases which were always identical in character, then it would be impossible that the remedy which succeeded once should ever fail, for if the diseases are identical they must yield to identical treatment. But as manifestly they do not so yield, they clearly demonstrate that in spite of bearing the same name they are essentially different disorders, wherein insufficient pains have been taken to discover the distinguishing symptoms. Certainly these various disease-states might be called *kinds of facial* neuralgia, for they are not all of them always one and the same disease. And so it is with the other diseases mentioned, and yet others of a similar sort.

52

And so, finally, with regard to other diseases, the greater the variety of morbid conditions embraced under one name (conditions distantly resembling one another in respect of one or two symptoms, but differing widely in the vast majority of their phenomena and peculiarities), the more unsuitable does the name become and the more dangerous the tendency which the name encourages towards empirical treatment. Such ambiguous names as ague, dropsy, consumption, leucorrhœa, hæmorrhoids, melancholia, mania, etc., can be taken as examples.

Author's note.—What myriads of so-called agues there are, differing widely from one another, having in common at most the phenomena of chills and heat and something of an intermittent type, and often not even that!

Closer investigation of their other symptoms reveals that almost every one of these differing kinds is a disease *sui generis*. With what right are many most different diseases classed under the one name of jaundice, when all their symptoms but one are different, and that one, yellowness of the skin, depends on a disturbance of bile-excretion which may arise from very different causes? So also among the symptoms of countless very dissimilar illnesses there is found œdema; but who would classify under the common name of dropsy all these most different diseases as if they were one, on account of a single symptom, very conspicuous it is true, but not therefore always important, often indeed not important at all? And likewise with the other examples cited.

53

How, with any appearance of reason, can diseases be grouped under general names when they have often only a single symptom in common, and how can such a classification justify their similar medicinal treatment? And if the medicinal treatment is not to be identical in all the cases—as it cannot be without detriment to the patients—what is the use of identical names which imply an identical treatment? These names, therefore, are so misleading, useless, and harmful that they ought to exercise little influence upon the treatment of a rational physician. He, at least, knows that he has to form a judgment on diseases and to cure them not on the basis of a vague similarity in a single symptom, but under the guidance of the whole complex of signs and symptoms presented by each individual patient, whose sufferings he must

investigate exactly to the exclusion of mere hypothesis and conjecture.

54

Even those far-reaching diseases which may be spread abroad by infectious material during an epidemic, the great number of so-called putrid, bilious, nervous fevers (hospital, jail or camp fevers), or other contagious fevers, are very different in their character and their course at every time of their occurrence. Every fresh epidemic, for instance, of the so-called putrid fever appears in many of its most striking symptoms unlike all previous epidemics of the same name, because there is a different miasm at the root of each epidemic. It is counter to all logical exactitude to give to this very different disorder the old name and thus to be misled by the misuse of a name into employing the same medicinal treatment for this epidemic as for former epidemics of the same designation.

55

In the case of such epidemic or sporadic disorders we can only consider as similar, for the purposes of curative treatment, the various cases that occur in each separate outbreak, which in this respect is fitly called a collective disease. These cases we can treat on similar lines, with due regard to the greater or lesser variations from type which appear in each single case.

56

For every epidemic includes a number of very similar cases of disease; but different epidemics differ very markedly one from another and can

neither be rightly called by the same or a similar name, nor treated indiscriminately with the same remedy.

57

These epidemics, to which no constant and universally suitable name can be given (since at every fresh appearance among the nations they present an altered form and different groups of signs and symptoms), are best considered as collective diseases. But under this designation they should be grouped with that extensive class which is made up of all other diseases, illnesses, and disorders which arise from the concurrence of causes and forces differing widely in their number, strength, and kind. Indeed, these influences are of an infinite variety, and hence arises the infinite diversity of the diseases from which the great race of man has suffered and still suffers in the world.

58

All things that have any individual influence (and their number is legion) can affect our organism and bring about changes therein, because our organism stands in relation to all parts of the universe in a constant action and reaction. And every such influence produces a distinct change of its own in virtue of its own distinct and unique nature.

59

How different then, may I not say, how infinitely different, must those diseases be, which result from the action of these innumerable forces! Often the forces are inimical in the highest degree when they affect our bodies with

more or less of simultaneity, or in succession in different qualities and varying strengths. And in addition our bodies vary so much in so many external and internal individualities and peculiarities and the conditions of life are of such manifold variety that no human being exactly resembles another in respect to any imaginable point.

Author's note.—Some of these influences, which predispose to disease or produce it, are the countless number of emanations, more or less harmful, given off from organic and inorganic substances; the many different kinds of gas, each with a different irritative power, which disturb or alter our nervous systems in our dwellings and workshops, or stream out against us from water, earth, animals and plants; the lack of sufficient nutriment for the maintenance of full vitality or of pure, fresh air; excess or deficiency of sunlight or of electricity; varying atmospheric pressure and varying dampness or dryness of the air; the properties and possible ill effects, as yet unknown, of high mountain regions and of low-lying lands and deep valleys: the peculiarities of climate and situation in great plains, in deserts without water or plant life, on the sea coast or near swamps, on hills, in woods or in places exposed to various prevailing winds; the influence of very changeable weather or of long-continued unchanging weather; the influence of storms and other meteorological conditions; exposure to air that is too hot or too cold; the effect of too much or too little artificial warmth, either from clothing or heated rooms; the hampering of limbs by certain forms of dress; the habitual taking of food or drink which is too hot or too cold; hunger, or thirst, or excessive eating, or excessive drinking; or the

power to injure the body medicinally which some articles of diet possess, such as wine, brandy, beer adulterated with more or less harmful herbs, impure drinking water, coffee, tea, indigenous or foreign spices; or the unknown but possibly injurious effects of certain plants and animals used for food; or injurious properties that articles of diet may acquire through careless preparation, spoiling, substitution or adulteration; want of cleanliness of person or clothes or dwellings; harmful substances that get into food through uncleanliness or carelessness in preparation or storage; the inhaling of injurious vapours in sick rooms, mines, stamping-mills, stations for the roasting and smelting of ore; the dust which may surround us from stuffs made in factories and workshops laden with many dangerous substances; neglect of various police-regulations for the safety of the common weal; excessive bodily exertion; overworking of one or other organs of body or mind; various unnatural postures acquired in various occupations; want of use of certain parts of the body or general laziness; irregular times of rest, of meals, of work; excess or deficiency of sleep at night; especially excessive mental exertion, or mental work of an unpleasant and compulsory nature, or such as excites or wearies certain faculties of the mind; or violent uncontrollable passions, such as anger, fear and vexation, etc.

60

Hence arises the unimaginable number of different diseases of body and mind; diseases so different that, strictly speaking, it is hardly too much to say that each has only existed once in the world. Therefore (except for those few

diseases caused by a definite unchanging miasm, and probably a few others) every epidemic or sporadic collective disease is to be regarded and treated as a nameless, individual disorder, which has never occurred before exactly as in this case, in this person and in these circumstances, and can never in this identical form appear in the world again.

61

Since Nature herself produces diseases of so individual a kind, no rational medical art can exist which does not strictly individualize each case of disease—that is, which does not regard each case of disease as distinct and unique, which in truth it is.

62

This individualizing examination of each case of disease as it appears demands from the physician nothing but freedom from prejudice, sound sense, attention in observing and exactness in tracing the picture of the disease.

63

The patient relates the course of his sufferings; those in attendance on him tell of his complaints and his general condition; the physician sees, hears, and observes by his other senses, what is altered and unusual in the patient. He writes down all that the patient and his friends have said, using their exact expressions. Keeping silence himself, he allows them to say all they wish, if possible without interruption. At the outset the physician requests them to speak slowly so that he can commit to writing as much as he wishes.

Author's note.—Every interruption breaks the train of thought, and the speakers thereafter seldom or never express themselves exactly as they would otherwise have done.

64

Every statement of the patient or his friends is written in a separate paragraph, so that all the different symptoms are ranged one below the other. In this way the physician can make additions to any record which at first was too vague or inexact.

65

When patient and friends have said all they wish to say, the physician examines each symptom more closely in the following way. He reads over the symptoms one by one as they were related and asks for further details about each one; for instance, he asks, "At what time did this symptom appear?" "Before taking the medicine? whilst taking the medicine? or only some days after leaving off the medicine?" "Exactly what kind of pain was it?" "What was its exact position?" "Did the pain come in paroxysms at different times, unaccompanied by any other symptom?" "How long did it last?" "At what time of day or night was it at its worst, and at what hour did it cease?" "What was the exact character, in plain words, of this or that symptom or circumstance?"

66

In this way the physician obtains more exact knowledge of each symptom, but he never frames his questions in such a way that the patient can answer with a simple "Yes" or "No" (that is,

he never suggests the answer). If care is not taken in regard to this, the patient will be misled into giving an affirmative or negative answer that is untrue or half true or inexact, in order to save himself trouble or (as he thinks) to please his questioner, and therefrom a false disease-picture and an unsuitable treatment will necessarily result.

Author's note.—For instance, the physician should never ask either patient or friends such questions as "Did you not observe this or that?" "Is it not a fact that the condition was so and so?" since such suggestions lead to false information.

67

If in the course of these voluntary statements nothing has been said of certain parts or functions of the body, the physician enquires concerning those parts and functions; but he always uses general expressions, so that his informants are compelled to speak in detail.

Author's note.—Thus, "What is the character of the stools?" "How freely does he pass urine?" "How does he sleep by day, and how by night?" "What is his disposition?" "What about thirst, or any special taste in the mouth?" "What kinds of food and drink does he like, what does he most dislike?" "Has each kind of food its natural taste or an altered one?" "Is there anything to say about his head, his limbs, or his abdomen?"

68

It is upon the patient that most reliance must be placed in regard to his sensations, except in cases of malingering. When, therefore, the

patient has given the physician the necessary information either voluntarily or at least without prompting, so that the disease-picture is tolerably complete, then the physician may ask more detailed questions.

Author's note.—For instance, "How often do the bowels act, and what is the exact character of the stools?" "Is defæcation painful?" "Of what did the vomit consist?" "Is the evil taste in the mouth bitter, or sour, or putrid, or of what character?" "How does he behave when asleep?" "Does he moan or cry out or speak?" "Does he lie only on his back?" "If not, on which side?" "When did the rigor come on?" "How long did the cold stage last?" "And the hot stage?" "How great was the thirst?" "When did he sweat?" etc.

69

When full notes have been taken of all these particulars, the physician records what he himself has observed in the patient and ascertains whether all or part of this is characteristic of the patient when in health.

Author's note.—For instance, the physician observes how the patient behaved during the visit; whether he was morose or sad; whether he was drowsy or in any way dull of understanding; whether his voice was hoarse or low, or how otherwise he spoke; what was the colour of his face, of his eyes, and of his skin generally; the state of his tongue, of his breath, of his special senses; whether his pupils were dilated or not; and how swiftly they reacted to light; how he lay, and what efforts he made to raise himself; and anything else in his condition which may strike the physician as noteworthy.

70

The symptoms and sensations of the patient *during* a course of medicine do not furnish a pure picture of the disease. On the contrary, those symptoms and sensations from which he suffered *before* the use of the medicine or *some time after* he has ceased to take it give the true fundamental conception of the original form of the disease, and the physician must take particular note of these. Indeed, if the disease is chronic and the patient has been taking medicine up to the time when he is seen, he should be left some days entirely without medicine, and the physician should defer the exact examination of the disease-symptoms until the permanent features of the old disease appear unaffected in their purity by treatment, and a faithful picture of the original disorder can be constructed.

71

But if the threatening character of an acute disease admit of no delay, and if he cannot discover what symptoms were present before the treatment was begun, the physician must content himself with the observation of the diseased condition, altered though it is by medicines, in order that he may at least combat the existing disorder with a suitable remedy.

72

If the disease has any striking and obvious cause, the patient (or, at least, his friends when questioned privately) will mention it, either voluntarily or in answer to careful questioning.

Author's note.—Any cause of a disgraceful character, which patient or friends may not will-

ingly confess, demands skilful questioning on the part of the physician or else private information. Such causes, for instance, are poisoning, attempted suicide, debauchery, over-indulgence in wine or spirits, over-eating, and venereal disease; and in another sphere disappointed love, jealousy, domestic unhappiness, grief, ill-usage, baulked revenge, or injured pride. Or again some physical defect may be concealed, such as rupture or prolapse, etc.

73

When enquiring into the condition of a patient suffering from a chronic disease, the physician must investigate and weigh carefully the circumstances of the patient in regard to his ordinary occupation, his customary mode of living, his diet, his household surroundings, and so forth, so that any factor that is exciting or maintaining the disease may be discovered and removed.

74

In chronic diseases the investigation of the signs of disease mentioned above and of all others must be as careful and detailed as possible and must take note of the most minute peculiarities. This last is necessary, partly because these minute peculiarities are specially characteristic of chronic diseases and least resemble the features of acute illnesses, and therefore for the purpose of cure cannot be too exactly noted; and partly because patients become so accustomed to their prolonged sufferings that they pay little or no heed to the lesser accessory symptoms, which are none the less characteristic and often have a very important bearing on the choice of the remedy. Indeed, they almost look upon

these symptoms as a necessary part of their condition, almost as a state of health; for after five, ten, or twenty years of suffering they have all but forgotten the sensation of genuine health and can hardly believe that these lesser or greater departures from the normal have any relation to their principal malady.

75

Further, patients differ so widely one from another that some of them (especially hypochondriacs so-called and other hypersensitive persons impatient of suffering) set forth their complaint in too vivid a light, and describe their symptoms in exaggerated language in order to make the physician more anxious to relieve them.

Author's note.—Pure invention of symptoms is never met with in hypochondriacs, even in the most impatient. A comparison of the symptoms they complain of at various times, as when the physician gives them nothing at all, or gives them only a *placebo,* demonstrates this. Only something must be deducted on the score of hyperbolic language and the use of superlatives, or at least the strength of their expressions must be attributed to their hypersensitiveness. From this point of view the very exaggeration that marks the descriptions of their symptoms becomes an important feature in the picture of the disease. It is a different matter when we are dealing with the insane or with rascally malingerers.

76

Other patients, of an opposite type of character, omit to mention a number of symptoms, partly from indolence, partly from misplaced modesty, partly from lack of intelligence, or else they

describe them vaguely or assert that some of them are of little consequence.

77

Now surely, on the one hand, the physician must listen most carefully to the patient's description of his symptoms and sensations, and especially must he be prepared to believe the actual expressions which the patient himself uses to explain his sufferings, because they are frequently altered and incorrectly stated by friends and attendants. But as surely, on the other hand, in all diseases and especially in chronic diseases, the discovery of the true and complete disease-picture and of its individualities demands particular insight, scepticism, knowledge of human nature, wariness in enquiry, and patience of the profoundest kind.

78

On the whole the physician will find the investigation more easy in acute diseases or those of short duration, because both patients and friends have recent and vivid memories of all symptoms and departures from the health which has been so lately lost. Here, too, the physician requires to know all that can be known; but he has less occasion for enquiry since the knowledge which he desires is for the most part spontaneously given.

79

In the investigation of the symptom-complex of epidemic or sporadic diseases it matters nothing whether or no anything similar has appeared in the world before under this or that name. The novelty or strangeness of an illness

makes no difference either to the examination or to the cure of it; for in any case the physician must look upon the clear picture of any prevailing disease as a thing new and unknown, and he must give it a thorough individual examination, if he wishes to be a rational practitioner of medicine. For him no conjecture can take the place of truth, nor dare he consider that he knows, in whole or in part, any case of disease brought to him, unless he has carefully studied all its manifestations; the more so as every prevailing illness (as exact investigation reveals) is in many respects a distinct phenomenon, very different from all previous diseases of a similar name. Epidemics due to a miasm that remains constant, as, *e. g.* small-pox, measles, and so on, form exceptions to this rule.

80

It may well happen that in the first case of an epidemic the physician will not obtain a complete picture of the disease at once; for such a collective disease only reveals the totality of its symptoms and signs to the exact observation of several cases. Nevertheless, the physician who examines with care can often arrive so near to the true position, even with the first or second case of an epidemic, that he forms a characteristic picture of it in his mind and thereby even at that early stage discovers a suitable counter disease-force for it, a remedy adapted to its requirements.

81

In the course of recording the symptom-complex of several cases of this kind, the disease picture, at first only sketched in, becomes stead-

ily more complete; not longer and more wordy, but almost always shorter, more easily recognizable, more characteristic, including more of the totality of this collective disease. Then the general symptoms of little importance and individuality (such as malaise, weariness, want of sleep, want of appetite, and so forth) retreat into the background, and the more striking and peculiar symptoms, belonging to few diseases and of rarer occurrence, began to stand out and to make up the characteristic picture of this illness.

Author's note.—If the physician has found for the earlier cases a remedy approximately suitable, and still more if he has found the almost specific remedy, he will either find the later cases confirm the suitability of his first choice (selected upon a true, albeit incomplete, conception of the disease), or he will find himself led to a more suitable remedy, and finally to the most suitable, the specific, remedy.

82

When once the whole complex of symptoms, the picture of any particular kind of disease, is exactly drawn out, then the most difficult part of the physician's task is finished. Then he has it always before him; he can study it in all its details, in order to discover an effective opposing force, an artificial counter disease-force, similar to the existing disorder, chosen out of the symptom-lists of all the medicines which are known to him; and when in the course of treatment he wishes to learn the effect of the remedy, he need only remove from the original complex of disease-symptoms those that have been ameliorated, and add any new symptom that has appeared.

83

The second point in the task of a rational practice of medicine concerns the choice of the homœopathic remedy. This is that artificial disease-producing power whereby the patient can be, as it were, inoculated with a similar illness, an artificial counter-disease which by the resemblance of its symptoms can overcome and extinguish, and thus radically cure, the disease from which the patient suffers.

84

To this end individual remedies must be known in all their power as disease-exciting agents. That is, as far as possible, all the disease-symptoms and alterations in the body which various remedies have the power to produce must be known before any one remedy can be chosen to combat the natural disease under treatment.

85

If, in order to discover this, a medicine is given to a sick person, little or nothing of its pure effects is seen, because the effects which it is especially desired to observe, namely, the alterations in the state of the body resulting from the medicine, are so mingled with the symptoms of the existing natural disease that they can be recognized only doubtfully or not at all.

86

To avoid this and to discover what distinctive alterations, symptoms and signs various medicines could produce in the health of body and mind, in other words, what elements of disease they tended to arouse, there was no course more

natural than to administer them experimentally to healthy people in moderate doses.

Author's note.—The great Albrecht von Haller recognized this necessity long ago (in the preface to *Pharm. Helvet.*) : Nempe primum in corpore sano medela tentanda est, sine peregrina ulla miscela : odoreque et sapare ejus exploratis, exigua illius dosis ingerenda et ad omnes, quae inde contingunt, affectionum excretiones adtendendum. Inde ad ductum phaenomenorum, in sano obviorum, transeas ad experimenta in corpore ægroto," etc.

87

As soon as I undertook this task with resolution, not a few powers of artificial disease were revealed to me in the course of an observation conducted at no small sacrifice and with the greatest possible care. These can now be employed with exact certainty for arousing counter-diseases, that is, as homœopathic remedies for natural disorders.

88

Many lists of symptoms recorded in older writings also came to my notice, which furnish examples of the ill effects of powerful substances when swallowed by healthy persons in large quantities.

Author's note.—It was never suspected that the first foundation of a knowledge of drugs had been laid by these histories of drug-diseases. Hitherto this knowledge had remained almost entirely conjectural, that is, had hardly existed at all.

89

The agreement of my observations on the real effects of medicines with these older records

(albeit the latter were not recorded for purposes of therapeutics), and even the agreement of these accounts with others of a similar kind, must readily convince us that drugs produce morbid alterations in the healthy human body in accordance with established, unalterable laws, and that each has power to excite its definite, individual, invariable symptoms of disease.

90

In those older descriptions of the effects, frequently dangerous, produced by the swallowing of over-doses of medicines, it is often noticeable that symptoms of a kind entirely opposed to those which were first observed appear in the later stages of these melancholy occurrences.

91

I also in my own early experiments observed such late-appearing symptoms fairly frequently (though far less often than in the older accounts referred to, because I did not experiment with such immoderate doses); but I found in continuing my experiments that, as surely as I used smaller doses, so surely did these late symptoms appear but rarely, while the early symptoms were observed in far greater number and with no less clearness, especially when I redoubled my care in observation and avoided everything which could possibly hinder the exactness of the experiment.

92

The fact that the frequency of these later symptoms (which may be called "negative" or "secondary") is greatest when large doses are given, and diminished in exact ratio to the diminution of the dose, shows that the secondary

symptoms are only a kind of after-disease due to large doses following upon the cessation of the early symptoms ("positive" or "primary" symptoms). It is a kind of opposite or reactive condition, analogous to the customary process of life wherein everything seems to go on by a series of alternating states.

Author's note.—As sadness usually follows upon excessive joy, liveliness upon sleep, heat upon chill, and *vice versa*.

93

After the administration of every powerful medicine a considerable number of different symptoms appear, a whole series of occurrences and signs of disease, which are all primary symptoms if the experimental dose was not excessive. These more frequent primary symptoms are the chief effects of the medicines viewed as artificial disease-producing forces.

94

Among these there are not a few symptoms which are partly, or in some circumstances entirely, opposed to other symptoms which have appeared earlier or may appear later. These are not therefore to be regarded as secondary symptoms or the after-disease produced by the medicine, but only as the alternating phase of the paroxysms of the positive (or primary) drug-action.

95

When medicines are administered to the healthy, some symptoms follow more often, some less often, and some only appear very seldom. The most unusual symptoms and those which

appear most regularly are the most valuable as indications.

Author's note.—Idiosyncrasies are often no more than these rare but real effects of drugs on persons who, although healthy, possess a special sensitiveness to the action of special substances. Thus the handling of some kinds of sumach causes skin-eruptions in certain people, and eating mussels causes erythema and urticaria in others. Again, some horses and cows have been suddenly killed by eating leaves of yew, while other animals of the species are affected but little.

96

Every medicine produces special effects which are never exactly counterfeited by any other.

97

As every species of plant differs from every other species in its external form, in its individual mode of life and growth, in its taste and in its smell, and as every mineral and every salt is certainly different from every other in external appearance as well as in its inner physical and chemical peculiarities (whereby any confounding of one with another should surely have been prevented), so assuredly are they all different in their power to produce disease (and therefore also in their power to heal). Each substance effects alterations in the health and condition of the human body after its own distinct and definite fashion, a fashion which forbids the substitution of any other substance for itself.

Author's note.—Whosoever exactly knows and rightly values the extraordinary difference between the effects of one drug and those of any

other, can easily see that from a therapeutic point of view there can be no equivalent remedies, no surrogates. Only those who do not know the pure and definite effects of different medicines can be guilty of such substitutions. Thus the minerals wherein a later and more cunning chemistry has discovered new and individual metals, differing widely from all others, were held by our ignorant ancestors for stones and earths of no value; thus, too, children confound things essentially most different because they hardly know their external appearances, far less their true worth and their inner and most varying peculiarities.

98

Substances belonging to the animal and vegetable kingdom are most powerful as medicines in their crude state.

Author's note.—Those plants and animals which are used for food have the advantage over others of possessing a larger proportion of nutritious material, and differ from the others in that their medicinal powers in the raw state are either not so strong or, when they are strong, are lessened and destroyed by drying (as those of the arum and peony root) by expression of the poisonous juices (as of cassava), by fermentation (as of sour gherkins), by smoking and by the action of heat (in roasting, frying, baking, boiling), or are antidoted and rendered harmless by the addition of salt, sugar, and above all vinegar (in sauces and salads). Even most medicinal plants lose some or all of their power by such procedures. The juice of the heroic plant is often reduced to an inactive pitch-like substance by the heat commonly used in making an extract. The expressed

juice of the most deadly plants in their fresh state, if allowed to stand for only one day in a moderately warm place passes into complete alcoholic fermentation and is deprived of much of its medicinal strength; but if it is left to stand for another one or two days till the acetous fermentation is complete, all specific medicinal power vanishes; the deposit is then quite harmless and resembles wheat-starch.

99

In order to examine the effects of medicines it must be remembered that strong drugs (so-called "heroic") will display their effects when given in quite small doses, in healthy, even robust persons. Those of lesser power must be given in more material quantities for the purpose of these experiments, but the weakest drugs can only be tested upon such subjects as are free from disease, but at the same time are delicate, excitable and sensitive.

100

The physician planning these experiments, upon which hang the welfare of generations of men, should choose no medicines but those which he knows well and of whose purity and potency he is entirely convinced.

101

Each of these medicines must be administered in a perfectly simple and unadulterated form, in powder, or alcoholic tincture, or (if they are salts and gums) in watery solution, so as to procure only individual effects of each substance. As, however, infusions of plants in water and fresh plant-juices are spoilt by fermentation within a few hours, drugs belonging to these

classes must either be administered without delay as soon as they are prepared, or fermentation must be delayed by the addition of a little spirit of wine, or avoided by the use of a larger quantity of alcohol.

102

For the purpose of these experiments every drug must be given alone and quite pure, without admixture of any foreign substance; and nothing of a similar kind must be taken either at the same time or shortly before or after the dose of medicine.

103

The healthy person who is the subject of the experiment must take, while fasting, about such a dose as is commonly used in medical practice. It is best given in solution, and no food should be taken for some hours afterwards. The subject must be willing to pay strict attention to his condition without losing his mental tranquillity.

104

If (as is best) the effects of this single dose are to be observed over a period of several days, the diet must be strictly regulated. As far as possible it should be of a simple nutritious character without condiments; and green vegetables and fresh roots should be avoided as they all have some disturbing medicinal action in whatever way they are prepared. The drinks should be those usually taken, as little stimulating as possible.

105

The subject must refrain from any kind of excesses, especially sexual excess.

106

If no result follows the first dose, or at least nothing clear and definite, a second dose of double the quantity should be given on the second day, and if this also produces no effect, then a still stronger dose on the third day.

107

This repetition, however, will seldom be required if both the experimenter and the physician are equally observant. To obtain a pure result, at least as regards the regular succession of the symptoms, it is far better to see whether the experiment cannot be carried through by the administration of a single dose, and only to give another dose of the same drug after (say) some weeks; or better still, after a considerable time, to administer a single dose of a different medicine.

108

In this way the order of appearance of the drug-symptoms can be better observed than when a second dose of the same medicine is given soon after the first; also the duration of the action of a drug on the human body is more certainly determined by the administration of a single dose than by any other method.

109

When, however, it is desired to investigate the symptoms themselves, especially those of a medicine of little power, without regard to duration of action or succession of symptoms, then the preferable method is to give it every day in an increasing dose or several times a day in the same dose. In this way the powers of even

the weakest drug, as yet perhaps unknown, will come to light.

110

All the individual symptoms of a drug do not appear in any one person selected for experiment, nor do they all appear at once or on the same day, but some appear in one person and some in another, and yet in such a way that some or many of the symptoms will be found in a fourth or tenth prover which appeared earlier in the second or sixth or seventh; moreover, they will not all appear precisely at the same hour.

111

The number of disease-elements which a medicine can produce is only brought near completeness by repeated observations on many suitable persons.

112

In conducting such an experiment with a definite medicine the smaller the doses, up to a certain point, the more surely (within limits) will the primary symptoms, unmixed with secondary, appear conspicuous in the proving; provided always that the observation is conducted with the most minute attention and aided by the choice of a prover who is in every respect temperate, self-observant and sensitive.

113

When over-large doses are employed, not only do the secondary symptoms play a large part, but the primary symptoms appear in so confused and sudden and precipitate a manner that they cannot be exactly observed; to say nothing

of the danger, which cannot be a matter of indifference to any one who cares for his fellows and regards the least of mankind as a brother.

114

The subjects of the experiment must be able to express their sensations exactly and clearly.

115

In the investigation of these drug-symptoms all suggestion must be as rigidly avoided as in the examination of the symptoms of disease. The greater part of what is recorded as the genuine result of experiment must be the voluntary statements of the prover; nothing must be conjectural, nothing guessed at, and as little as possible should consist of answers to formal questions; least of all should the record contain expressions relating to sensations with which the prover has been previously prompted, or the results of questions that suggest the answers "Yes" or "No."

116

In order to render these important statements as accurate as possible it is a good plan, as soon as any symptoms or sensations of the prover are written down, to make him repeat his description, so that, when his second account is identical with the first, it may be recorded in that form, and when the accounts vary he may be confronted with both and invited to choose and confirm the statement which is nearest to the truth, and thereby render true, pure and striking the picture of the drug disease which has been discovered through his aid. The physician who is observing the experiment adds

to the description whatever alterations in health he has himself observed in the prover.

117

The record of the more definite and striking symptoms must be accompanied by a note of the time that elapsed between the giving of the dose and the appearance of the symptoms, the time of day at which they appeared, their duration, and all contingent circumstances; those symptoms that are observed more often in the same way should be underlined, and the doubtful ones followed by a mark of interrogation or enclosed in brackets until perhaps the doubt concerning them is removed by the confirmation of other experiments.

118

The weightiest experiments in drugs remain those conducted by the closely observing and unprejudiced physician upon himself.

119

Even in diseases, especially in chronic diseases, the symptoms of a remedy can sometimes be discovered beneath the symptoms of the original disorder. But it is a subject for the higher art and should be left to masters of observation alone.

120

If we have thus tested on healthy persons a number of medicines, and have carefully and faithfully recorded all the disease-elements and symptoms which as artificial disease-producing forces they are able to arouse, then we possess a Materia Medica, a collection of the genuine

positive mode of action of simple medicines, a codex of Nature wherein is registered a considerable list of the individual symptoms and disease-elements of each powerful and tested drug just as the observation of the experimenter discovered them. Among these are to be found the elements of many natural diseases which can be cured through the likeness herein established.

121

In such a Materia Medica there is nothing conjectured, asserted without proof, imagined, invented; but all is the pure reply of Nature to careful questioning.

122

Truly only a considerable supply of medicines thus accurately known in their positive modes of action can serve our turn, and enable us to discover a remedy for every one of the innumerable natural cases of disease.

Author's note.—When thousands of exact and tireless observers, instead of one as hitherto, have laboured at the discovery of these first elements of a rational Materia Medica, what will it not be possible to effect in the whole extent of the endless kingdom of disease! Then the art of medicine will no longer be mocked at as an art of conjecture lacking all foundation.

123

Nevertheless even now there are but few cases of disease for which, even out of this small supply of provings,[1] a suitable analogue of counter disease-force (*i. e.* a remedy) cannot be

[1] "Fragmenta de viribus medicaminum positivis."—HAHNEMANN, 1805.

found which will bring about a restoration of health gently, swiftly and enduringly without any marked perturbations. This fact depends on the manifold variety of symptoms and the abundance of disease-elements which every one of the powerful medicines hitherto tested has already displayed in its positive action on the healthy body. In spite of the limited choice of remedies (even now not completely known), incomparably more and better cures can be achieved by this method than by the so-called general methods or any other of all the irrational non-homœopathic ways of treatment.

124

Whenever in the provings of one or other of these medicines, tested in their positive action by observations on the healthy body, we find a symptom-complex analogous to that of a given natural disease, that medicine will, nay, must, be the most suitable counter-force for the destruction and extinction of that natural disorder; the specific, or completely suitable, remedy is discovered in that medicine.

125

If now the counter disease-force (the drug) is entirely suitable by its likeness of symptoms (that is, if it be selected on the ground of its homœopathicity), and if, further, it is administered properly, then the natural disease, however threatening or severe, however encumbered with many symptoms, will depart almost unnoticed in a few hours, provided it has not been of long duration. If it is of longer standing, it will be a few days before it disappears. In either case practically none of the pathogenic symptoms of the drug, that is, of the artificial counter-

disease will be observed. In rapid and hardly noticeable sequence, there comes only health; the natural and the artificial disease both swiftly and gently vanish, without perceptible reaction; there has been a true dynamic annihilation.

126

Here we arrive at the third point in a rational system of therapeutics, the most suitable method of administering the homœopathic remedy in cases of disease.

127

If a patient complain of one or two trivial symptoms, which have but recently appeared, the physician should not look upon this as a complete disease requiring therapeutic aid. A slight alteration in diet and mode of life will usually be enough to make an end of such an illness. But if the patient complain only of one or two violent symptoms, the physician will generally find, on examination, other, though lesser, symptoms, which make up a complete disease-picture. This is generally the case with chronic disorders, of which more hereafter.

128

The more severe an illness is, the more ominous and striking usually are the symptoms of which it consists. But thereby the more surely also is a suitable remedy discovered for it, if a sufficient number of medicines, tested in their positive actions, is at our disposal. Among the symptom-groups of many drugs it is not as a rule difficult to find one whose particular disease-elements and symptom-complex present a very similar picture to those of the natural disease,

thereby constituting it a suitable counter disease-agent; this is the desired remedy.

129

In this search for a specific homœopathic remedy, that is, in this comparison of the totality of the symptoms of the natural disease with the symptom-lists of available medicines, the more striking and unusual of the characteristic symptoms of the disease should especially be kept in view; for it is precisely to these symptoms that analogues must be found among the disease-symptoms of the drug which is to be the most suitable remedy. On the other hand the general signs, like loss of appetite, weariness, discomfort, disturbed sleep, and so forth, are of little significance when unaccompanied by more precise indications, because they are found in the symptomatology of most drugs as of most natural diseases.

130

If, then, the counter disease-picture, constructed from the symptom-list of the remedy held to be most suitable, contains in the greatest number and closest resemblance, these striking and characteristic symptoms of the disease that is to be cured, then *this* medicine affords the most apt artificial counter-disease for this case of illness, and is, in short, the specific remedy. The disease will be removed and extinguished without any disturbance, often even within the period of action of the first dose.

131

I say, without disturbance. For in employing this most suitable counter disease-force, only

those drug-symptoms are called into play which correspond to the disease-symptoms (and the first destroy the second); the other and often very numerous symptoms found in the symptom-list of the suitable remedy remain entirely latent because they find nothing to correspond to them in the disease-condition. Nothing of them will be noted in the condition of the patient, which will improve from hour to hour; presumably because the whole power of the specific remedy is concentrated on those disease-symptoms which resemble its own and is entirely devoted to the destruction of these similar symptoms.

Author's note.—Yet there is no homœopathic remedy, however suitably chosen, which may not in the course of its action on a very excitable and sensitive patient, cause at least one, probably very trifling, unwonted disturbance, a little new symptom. For it is almost impossible that medicine and disease should cover each other in their symptoms as exactly as two triangles with equal angles and equal sides cover each other. But generally these unimportant differences are readily adjusted by the individual energy of the living organism, and only patients of unusual sensitiveness are aware of them; recovery goes steadily forward, unless prevented by errors in the conduct of the patient's life or by excitement of the passions.

Translator's note.—In more modern phraseology it might be said that drugs have an individual power, in sufficient doses, of affecting certain body-tissues, often indeed a large number of tissues. When these tissues are affected by disease in a way resembling the action that the drug exerts upon them, they, being rendered more sensitive by disease, will respond to the stimulus of a smaller dose of the homœopathic

remedy than was originally required to call out symptoms in the healthy provers. But the smaller dose, which can affect the diseased and thereby sensitized tissues and can probably cause amelioration, is not strong enough to arouse symptoms in tissues which have remained normal, in spite of the fact that the drug possesses a distinct relation to these tissues. Consequently symptoms due in the provers to disturbances of these tissues (which *ex hypothesi* remain normal in this particular patient) do not appear as a result of administering the drug, unless in unduly sensitive subjects, and then only to a small extent.

132

But although it is certain that a suitably selected homœopathic remedy gently destroys and removes disease, without arousing such special symptoms of its own as are not present in the patient, that is, without exciting sufferings of a new and serious kind, yet it usually causes, as it were, a slight aggravation of the patient's condition in the first hour or two after its administration. This aggravation so closely resembles the original disease that it seems to the patient to be a real worsening of his symptoms. But it is in reality no more than the onset of a very similar medicinal disease rather more powerful than the original disease. This slight homœopathic aggravation during the first hours (which is, in fact, a very good prognostic sign that the acute disease will probably yield to the *first* dose), is quite as it should be; for naturally the drug-disease must be somewhat stronger than the illness if it is to overcome and extinguish it; even as an analogous natural disease can only

remove and destroy another when it is the stronger (S. 28). The smaller the dose of the homœopathic remedy, the less will be this aggravation of symptoms appearing in the first hours.[1]

Yet the dose of a homœopathic remedy can hardly be made so small that it will not overcome and ameliorate its analogous disease, indeed completely cure and banish it (S. 244). It is, therefore, easily to be understood why even the very smallest dose of a homœopathic remedy always causes a small homœopathic aggravation of this kind, albeit a very mild one, in the first hours after its administration.

Author's note.—This aggravation, an exaltation of the drug-symptoms over the analogous disease-symptoms has been observed by other physicians when by chance they have employed a homœopathic remedy. The use of viola tricolor at first caused an aggravation in the skin-eruption which it ultimately (homœopathically) cured (Leroy, *Heilk. für Mütter*).

133

Since the number of medicines exactly tested in regard to their positive action is as yet only moderate, it sometimes happens that only a smaller or greater part of the symptoms of a case of disease can be found in the symptom-register of the most suitable medicine. Consequently this incomplete counter-disease force must be employed for lack of a complete one.

[1] This corresponds to the experience of the use of vaccines and the "negative" and "positive" phases of Sir Almroth Wright.

134

In such a case a complete undisturbed cure by this drug is naturally not to be anticipated. After its use many more symptoms may appear in the patient than were previously present as a result of the disease. These will not prevent the uprooting of a considerable part of the disorder, nor the establishment of a fair commencement of a cure; but nevertheless, complete cure may be impeded by these accessory symptoms.

135

The small number of homœopathic symptoms shown by the best-selected medicine is little or no hindrance to cure, if these few symptoms for the most part correspond to the characteristic and specially striking features of the disease. In such a case cure follows the use of the remedy swiftly and almost undisturbed.

136

If, however, few of the outstanding characteristic symptoms of the disease can be paralleled in the symptomatology of the chosen drug, and if it corresponds to the disease chiefly in such general symptoms as nausea, weariness, disturbed sleep, discomfort, and so forth, and in little else; then, if no remedy more exactly homœopathic can be found among such agencies of counter-disease as are known, the physician can promise himself but little immediate favourable result from the use of the drug.

137

Such a case, however, is rare even with the number, as yet small, of medicines known in their positive actions; and the bad effects of

administering such a remedy are lessened as soon as another, more suitable, medicine can be chosen.

138

Thus, if accessory symptoms of some moment occur after the use of the first selected medicine, which is not exactly homœopathic, this first dose should not be allowed to exhaust itself and expose the patient to the full duration of its action; but the altered disease-state should be freshly examined, and a new disease-picture made from the combination of the remaining original symptoms with those that have just appeared.

139

We shall then more easily find among our known medicines an analogue to the new disease-picture just presented, and a single dose of this remedy, if it does not entirely destroy the disease, will bring recovery much nearer. And if even this drug is not enough to achieve a complete cure, we proceed similarly with the repeated examination of the disease-condition and the repeated selection of the most suitable homœopathic counter-force till our object is achieved and the patient is completely restored to health.

140

If on the first examination of a disease and the first choice of a remedy it is found that the symptom-complex of the illness cannot be effectually covered from the symptom-register of a single medicine (owing to the insufficient number of medicines which are known); and if further it is found that two medicines contend for preference, the one corresponding more

closely to one part of the symptom-complex and the other more closely to another part; then it is not desirable to give one medicine after the other without further close examination, nor to administer both together, for no one can foresee how the one may hinder and perturb the action of the other (S. 235, 256).

141

It is far better first of all to give only the one which on the whole seems more suitable. It will certainly ameliorate the illness in part, but will on the other hand bring out a new range of symptoms.

142

When this happens, the homœopathic law allows no second dose of the same medicine to be given. But at the same time the other remedy, which seemed suitable upon the first indications for the second half of the symptoms, must not be given without consideration and a further enquiry into the condition left after the use of the first medicine.

143

Far rather in this case, as always when a change has come about in the disease-condition, the present remaining symptom-complex must be considered anew and without regard to the second remedy which at first seemed partly suitable, in order that the counter-force most adapted to the present new condition may be selected without prejudice.

144

It seldom happens that the medicine which at first appeared the second best will now be

indicated. But if, indeed, this very remedy appears after the new examination at least as suitable as any other, then it deserves the more confidence, and should be straightway administered.

145

It is only in cases of long-standing chronic disease, not subject to any notable change, which possess definite stable fundamental symptoms, that sometimes two medicines almost equally homœopathic can be used with advantage in alternation;[1] and even that is only to be tolerated as long as amongst the number of proved remedies there is none that offers a group of symptoms altogether or almost parallel to those of the chronic disease in question. If there should be such a remedy, then it alone and unaided will do all that is required, and will cure swiftly and enduringly and without perturbation.

146

A similar difficulty in the art of healing arises in cases where the number of disease-symptoms is too limited. This contingency demands the most careful attention; for if the difficulty which it creates is now removed, then almost all the difficulties which hinder the therapeutic art are disposed of, except the lack of remedies homœopathically known.

147

The only diseases which seem to have but few symptoms, and are therefore more troublesome to cure, are those which may be called incomplete, since they present only one or two leading

[1] Hahnemann never regarded this procedure as other than a make-shift, and in later years ceased to recommend it.

symptoms, and these obscure almost all the rest. They belong for the most part to chronic diseases.

148

Their principal symptom may be either of an external character or may affect an internal organ; as, for instance, headaches of years' duration, long-standing diarrhœa, cardialgia, and so forth. The first class are usually termed local diseases.

149

In incomplete diseases of the second kind, it is often due to the physician's want of observation that the symptoms which are actually present and which make up the complete disease-picture, are not fully discovered.

150

There are, nevertheless, a few illnesses which, after all preliminary examinations (S. 63–81, S. 178–182), present but one or two marked and violent symptoms and leave all others only vague and shadowy.

151

To deal successfully with such rare cases the first procedure is to choose the counter disease-force which is best indicated by these few symptoms.

152

Sometimes, indeed, it will happen that this remedy, chosen most carefully in accordance with the homœopathic law, albeit from few symptoms, will actually prove to be the exact counter-force required to destroy the existing

disease. This is the more likely to occur, the more striking, strange, and characteristic are the few disease-symptoms present.

153

But more often the medicine so selected will prove only partially suitable, since there was no complex of many symptoms to guide to a decisive choice.

154

In this case the medicine, which has been chosen as exactly as possible, but is nevertheless not completely homœopathic, will cause accessory symptoms while counteracting a disease to which it is only partially analogous. A similar sequence of events has been already noted as likely to occur when the choice of a remedy is incomplete from lack of sufficient counteracting forces, *i. e.* lack of exact knowledge of a sufficient number of medicines. The accessory symptoms and phenomena, which appear in these circumstances out of the symptomatology of the drug, are intermingled with those of the patient's condition, but are at the same time themselves to be regarded as symptoms of the disease, although they were not experienced before the administration of the medicine. Entirely new symptoms will appear, or symptoms hardly perceived before will become more marked.

Translator's note.—That is to say, the effect of a drug on a diseased body is, to a large extent, influenced by the nature of the disease, and forms, as it were, a commentary upon it, from which more knowledge of the disease can be acquired.

155

The accessory phenomena and newly appearing symptoms of disease must not be attributed entirely to the medicine. They originate from it, but they are always and only such symptoms as this particular disease had the latent power to produce in this particular body, symptoms which the medicine, as an agent having a similar tendency, merely elicited and caused to appear.[1] In a word, the entire symptom-complex now in evidence is to be regarded as that of the disease itself, as its actual existing condition, and as such it is to be treated.

156

Thus the choice of the remedy, which was in this case almost unavoidably imperfect, yet serves to make the symptom-complex complete and so to facilitate the discovery of a second homœopathic counter disease-force which shall be more exactly adapted to the needs of the case.

157

Therefore, after the action of the single dose of the first medicine is completed (unless the violence of the newly appearing symptoms demand more speedy aid) a new examination of the disease must be undertaken; the *status morbi*, as it now is, must be exactly noted, and a second homœopathic remedy chosen according thereto, which shall be exactly suitable to the immediate condition. This is the more readily and exactly done, because the group of symptoms has become more numerous and more complete.

[1] Except when they usher in the final death agony, or can be traced to some error in the mode of living, outbreak of violent passion, etc.

158

Among incomplete diseases (S. 147) the so-called local disturbances take an important place.

159

These local diseases, unless they have arisen a short time previously from an external lesion, always depend upon an inner malady extending throughout the whole organism; and the medicinal treatment of them must, therefore, also have regard to the whole organism, if it is to be reasonable, consistent, and effective.

161

No so-called local malady arising from internal causes and persisting in a definite region can be thought of as produced without the consent (as it were) of the rest of the general health, and without the participation of the other sensitive and irritable parts of the body and the other living organs. Thus the amelioration and even complete cure of maladies which appear isolated on the most distant parts of the skin, by means of a small dose of a remedy homœopathically chosen, placed on the tongue or introduced into the stomach, can only be explained by the general acute sensitiveness to medicinal powers and the ready, alert response to drug-force which permeate all parts of the living organism.

162

Such cures are best effected when the physician takes into account all noticeable alterations in the patient's general condition, and thus finds himself in a position to draw a complete outline of the disease-picture before seeking among the medicines known to him for a clearly marked counter-force to the whole complex of symptoms,

general as well as local. In this way a choice can be made which is completely homœopathic.

163

By means of this medicine employed internally (not externally) the general disease-condition of the body is removed simultaneously with the local disorder, and the first and the last are cured together. This proves that the local malady depends on a disease of the body as a whole, and is only to be regarded as one of the most important symptoms in a general disease.

164

This is so true that, when any remedy locally applied has cured without other aid and has restored health (as it has occasionally done), it has only been able to do so by exercising homœopathically a healing influence upon the inward disease-condition, and it would have cured equally well had it been administered only internally and not externally at all.

Author's note.—Thus some eczemas are removed by the external use of cantharides and some other eruptions by a similar use of mercurial preparations; but none of them are cured so that general health ensues, unless these external remedies have also the power to remove the inseparably associated inner disease-condition and have, therefore, affected the whole organism with their healing power.

165

It would seem, indeed, as though the cure of such a malady would be hastened, if the remedy recognized as truly homœopathic to the whole disease complex were not only administered

internally but also applied externally; seeing that the local affection usually strives to isolate itself (although it can never do this completely in the living organism), and that it is true that medicines act more speedily on the part to which they are applied than to more distant regions.

Author's note.—If cherry laurel water is injected into the bowel of an animal, its spasmodic action first appears in the lower limbs and later in the upper, while this order is reversed if the drug is swallowed.

166

Nevertheless, this simultaneous use of a remedy externally and internally in diseases where the local symptoms are the more marked, has this great disadvantage, that through the local application these principal symptoms (*i. e.* the local affection) will be destroyed before the internal disease is destroyed. Consequently through their disappearance it becomes difficult or even impossible in many cases to decide whether in addition the whole disease has been abolished.

Translator's note.—The belief that grave symptoms might ensue if skin diseases were suppressed was shared by most physicians in Hahnemann's time. This belief is not now widely held. The subject is a difficult one and hardly ripe for dogmatism. What Hahnemann fears in these paragraphs is the grave danger that the patient may seem to be cured with the disappearance of the skin eruption and so pass out of observation before he has really recovered.

167

A similar but, if possible, greater disadvantage generally follows the practice of using an active

remedy (even if homœopathic) only in local application to the local disease (in other words, the principal symptom), unless it has been previously administered internally to bring about the entire destruction of the general disease. For then it is even more unlikely that the remedy when only locally applied should have simultaneously acted so powerfully and completely on the inner organism as to remove and destroy the total disease as well as its local symptoms. This favourable result will only occur in the very rare cases in which the inner disease is but slight and the external affection is so extensive that the topical application will have been made over a considerable area of the body.

168

In all other cases the simple external application of a small quantity of the remedy will not exert upon the inner organism an action nearly powerful enough to destroy the inner and often chronic and deep-seated disease. Even if its proportionately more rapid curative action promptly avails to remove the local lesion, which is merely the most prominent symptom of disease, the inner malady still remains and the case has become more serious than before.

169

For if the local affection is made to disappear by this local incomplete treatment, then the internal treatment necessary for the complete cure of the total disease remains in vague obscurity; for now only the other and ill-marked symptoms remain, symptoms which are not so constant and persistent as the local symptoms, and often are not characteristic enough to enable a clear

and comprehensive picture of the disease to be constructed.

170

The physician in his search for a suitable internal treatment must remain in doubt whether the homœopathic remedy apparently indicated has entirely destroyed and removed the whole disease; for the most important and persistent symptom (the local lesion) has already vanished. He will have to work in semi-darkness, and thus will either give too much or too little of the remedy, or he will employ it too long or not long enough for complete cure; and thus the patient suffers.

171

If the remedy which is completely adapted to the disease has not been discovered before the local symptoms have been removed either by the knife or by some destructive or desiccating local application, the case necessarily becomes more difficult on account of the uncertain and insufficiently characteristic nature of the remaining symptoms. For the external and principal symptoms, which would have led most surely to the choice of the exact remedy and would have confirmed the choice by responding to its internal use, have been removed from observation.

172

If the external phenomena were still present, then their failure to disappear would show that the inner treatment was not yet complete; if, on the contrary, they disappeared under internal medication alone, that would constitute a convincing proof that the disease was uprooted and that the desired recovery from the whole disease was achieved—a priceless advantage.

173

The disappearance of local symptoms as a result of local treatment is almost always compensated in Nature by the increase and development of the other symptoms, hitherto virtually latent although recognizable, and by the appearance of new disease-phenomena. That is to say, there is a heightening of the remaining symptoms that make up the general disease. This result of a local application is usually wrongly called a driving inward of the external disorder upon the nerves or the "humours."

174

In some diseases this awakening of the other symptoms, after removal of the local manifestations, only takes place gradually, so that the aggravation of the patient's condition is only perceived after some lapse of time.

175

On the other hand, some other diseases presenting local symptoms show a sudden acute development of their remaining and generally internal symptoms when the important local manifestation has been removed by topical applications. This acute aggravation of the disease may be most alarming, and often ends rapidly in death. Here the local phenomena not only serve the end of hindering the development of the internal symptoms, as in chronic and sluggish cases of disease, but also seem to be raised to the position of the chief symptom, the symptom which, as it were, for the time absorbs the intensity and danger of the other symptoms and prevents their perilous development. The most melancholy experience teaches

how irrational it is in these cases, as well as in the others, to abolish the relatively beneficent local symptoms by a purely local treatment.

176

Fortunately the life-activity of the organism itself sometimes causes the return of the local symptom which has been artificially abolished; it is less desirable to attempt to do this by artificial means. Even inoculation is frequently unsuccessful, because as a rule the local disease inoculated is not the original one, but another which bears only a superficial resemblance to the first.

177

The rational cure of all such diseases depends entirely on the internal administration of a medicinal force, suitably adapted by its homœopathy to the whole symptom-complex, whereof the local symptom is but the most characteristic sign among a number of others. If this remedy is given internally, and if in addition a suitable regimen is ordered, the local application of the specific medicine will hardly ever be found necessary.

Author's note.—Different diseases require different rules of treatment in this respect. For some, local applications of the indicated remedy are most dangerous, for others, harmless or beneficial.

178

The difficulty of effecting a homœopathic cure of these incomplete diseases (among which the local diseases, so-called, should be mostly classed) depends principally, as has been already said, on the fact that they so seldom present

more than one outstanding symptom. The remaining symptoms, which with the local manifestation complete the disease-picture, remain in the background and escape the attention of most observers.

179

This difficulty can only be overcome by more searching and careful observations and inquiries.

180

To this end, if the patient complains only of a few severe symptoms and can furnish no others at the first examination, the physician does best to defer his judgment as to the curability of the disease and its curative treatment. These diseases are nearly always chronic and will not suffer permanently from a delay of several days, during which all deviations from health in the patient, great or small, can be more carefully investigated until every one, even of the trivial and hitherto unnoticed symptoms, has been elicited and exactly noted.

Author's note.—Local symptoms are hardly ever acute except when they are "metastases."[1]

[1] A metastasis is a severe localized symptom which appears naturally in acute diseases, apparently as an attempt to transfer them to an outward and less vital part of the organism, and so to save the inner life from the danger that threatens it. In such cases, although the local symptom at the moment masks the others, yet the remaining symptoms are more easy to discover owing to the phenomena which preceded the metastasis, and by taking these together with the local appearances, the entire symptom-complex and disease-picture can be obtained and a suitable homoepathic remedy selected ; cure then proceeds rationally and radically. In these cases it is especially dangerous to attack the local symptoms with topical applications alone.

181

In a chronic case of this kind the physician will encourage the patient to divert his attention from his local ailments and to take note of the accessory signs and symptoms however small. In this way special symptoms will be elicited which the patient had hitherto overlooked on account of the insistent nature of the more obvious malady.

Author's note.—If the patient stubbornly declines to make any further observations and insists on treatment without delay, it is advisable to treat him for a few days with some unmedicinal preparation instead of a drug, in order to gain time for the discovery, by further exact investigation, of all morbid changes in his condition. It is a harmless deception which will bring to light most of the special symptoms of his disease.

182

These other peculiarities of the patient, both the greater and the less, will aid the physician to obtain a complete view of the disease as a whole; and careful inquiries into the state of various bodily functions, a close observation of the manner and appearance of the patient, together with any information furnished by friends and asked for, if necessary, in secret, will add to the tale of facts already obtained all the additional information necessary for successful treatment.

183

In this way the physician will seldom fail to discover the entire symptom-complex of any chronic disease however obscure. Then from the disease-elements found among the remedies

that have been tested on healthy persons he can select the counter-force most similar to the natural disorder, that is, the exact homœopathic remedy. Here also the most special and characteristic symptoms of the disease must above all others be found in the remedy which is to prove appropriate.

184

If the drug first chosen actually corresponds to the disease in its entirety it must cure it. But if, owing to the insufficient number of fully proved drugs and the consequent restriction of our choice, the medicine selected is not exactly homœopathic, then it will arouse new symptoms which will in their turn point the way to the next remedy likely to prove serviceable.

185

Mental diseases appear to supply the next class of malady which is troublesome to cure. But actually they are not much more difficult to deal with than other incomplete diseases, among which they may be reckoned.

186

Indeed, they are in no wise really an exceptional class of disease, though often sharply separated off from others in classification. For in every other kind of disease the condition of the mind and of the disposition is invariably altered in some way, and the disposition and mental characteristics of the patient form symptoms of prime importance in all cases which the physician has to treat. Such symptoms must be included in the totality of disease-phenomena if a rational homœopathic cure is to be achieved.

187

This point is of such importance that it is not too much to say that the mental symptoms of a patient often form the determining factor in the choice of the medicinal counter-force. They are the characteristics which the observant physician can least of all afford to overlook.

188

The creator of medicinal virtues has had particular regard to this important feature of disease, namely, alterations in the mental and moral condition; for there is no drug in the world of any power which does not produce in healthy persons very marked mental and moral changes, which are different for every different medicine.

189

We shall, therefore, never learn to cure rationally or homœopathically, unless we consider in every case of disease these alternations in mind and disposition, and choose as a counter-force the remedy which is capable of causing similar alterations.

Author's note.—Thus aconite will never bring about a speedy or lasting cure in a patient of quiet, equable disposition; nux vomica is as little serviceable to gentle phlegmatic patients, pulsatilla as little to the gay and happy, ignatia as little to those who are imperturbable and disinclined either to fear or to vexation.

190

Thus all that there is to say concerning the cure of diseases of the mind and spirit can be compressed into a few words. They can be

cured, like all other diseases, by those remedies, and those alone, which possess a counter-force most nearly resembling their own, a counter-force which has been displayed in symptoms produced on the mind and body of healthy people.

191

The so-called mental and emotional diseases are, for the most part, no more than diseases of the body wherein the characteristic symptoms of disturbance in mind and disposition have more or less swiftly increased, while the bodily symptoms have more or less swiftly diminished, until finally a most striking disproportion is attained, almost like the disproportionate appearance of a local disease.

192

Cases occur not infrequently where a so-called bodily disease which is threatening to life (a disease of one or other of the important organs or an acute dangerous disease) becomes changed into melancholia or mania by an increase in psychical symptoms which have been present in lesser degree from the first. Then all the bodily symptoms lose their threatening character, decreasing to such a degree that their obscured but persistent existence is only to be detected by the persevering physician who is also gifted with fine powers of observation. In a word, they assume the form of incomplete diseases, local diseases, as it were, in which the mental symptoms which at first were mild and unimportant increase until they are the chief symptoms. Then they take the place, to a large extent, of the other symptoms, which they palliate by their own intensity; this is a process

which we have already noted in considering local disorders.

Translator's note.—These were the days when instruments of exact physical examination (stethoscope, thermometer, etc.) and the aids of the laboratory were nearly all unknown. Appearances can never again be as misleading even to the careless as they often were in Hahnemann's day to the most careful.

193

Therefore in dealing with these diseases, as with those of sections 180 and 181, the investigation of the symptom-complex demands the greatest perseverance, fine observation, most careful discrimination and a detailed enquiry if we would discover the bodily symptoms in diseases of the mind. The exact appreciation of the particular characters of each individual change in mind and disposition is, of course, of the first importance, and when combined with a knowledge of the bodily symptoms will lead to the discovery of the remedy appropriately homœopathic both in its mental and bodily symptomatology, and so will lead to the extinction of the disease.

194

For the determination of the non-mental symptoms the greatest aid is derived from a clear description of all the phenomena of the previous bodily disease which, through the one-sided exaggeration of its mental and emotional symptoms, developed into a mental disease.

195

The comparison of these earlier symptoms with the existing symptoms will show that the

first have persisted, although obscured and now hardly perceptible; and a characteristic symptom-picture of the disease can thus be better constructed.

196

If the mental disease is not fully developed from a bodily disorder, and if it remains doubtful whether it has not resulted from faults of education, evil habits, perverted morals, superstition or ignorance, the decisive criterion will be that disorders due to the latter causes yield to careful remonstrances, reasonable representations, consolation or serious advice, while true mental diseases speedily grow worse, melancholia becomes more melancholy, spiteful mania becomes more exasperated, and the nonsense of the fool becomes even more devoid of reason.

197

Nevertheless there are certain diseases of the disposition which have not simply developed out of bodily diseases; but, on the contrary, with but slight implication of the body, originate and endure from emotional causes, such as continued anxiety, worry, vexation and exposure to terror or fright. In time this kind of emotional disease affects the bodily health, often very adversely.

198

Emotional diseases of this order, originating in the mind, are precisely those which can be rapidly transformed into health, both of mind and body, by psychical means, such as a display of confidence, friendly remonstrance, sensible advice, and often by well-concealed deceptions. Their cure by such measures, however, can only

be achieved while they are yet recent and the bodily conditions little disturbed by them.

Author's note.—Mental and emotional diseases arising from bodily causes, which can only be cured by suitable homœopathic remedies, demand also and always a careful and appropriate psychical demeanour towards the patient on the part of attendants and physicians; a helpful kind of mind-regimen, as it were. To furious mania there must be opposed quiet fearlessness and cool resolution; to doleful lamentation a mien of silent sympathy; to imbecile chattering, silence, but not inattention; and of disgusting behaviour and foul speech no notice whatever should be taken. Destructive acts and injuries must be prevented without reproaches to the patient, and everything must be arranged to avoid any corporal punishment. For as in mental disorders there can be no sense of wrong-doing, so by all human justice there should be no punishments. Contradiction, eager explanations, violent correction and harshness are as disastrous to the mind and soul of such patients as timid yielding at the wrong time. Above all, contempt, deceit and fraud exasperate these patients, and aggravate their condition. A semblance must always be maintained of treating them as reasonable beings. On the other hand, all kinds of disturbing external influences should be removed. When for any case of disease of mind or disposition an exact homœopathic remedy has been chosen according to the truly delineated picture of the disease-condition (and this is the easier from the unmistakable character of the mental symptoms, which are the most important ones), then even the minutest dose will bring about the most striking improvement in a very short time, an improvement denied to the

strongest doses of all unsuitable drugs, though repeated even to an extent dangerous to life. I affirm that the superiority of the homœopathic over all other imaginable methods is nowhere shown in so triumphant a light as in the relief of long-standing mental and emotional diseases which have originated from bodily diseases or developed simultaneously with them.

Translator's note.—Hahnemann, apart from homœopathy, was one of the earliest pioneers in the humane treatment of insanity, and deserves a credit for his theories and practice in this regard which is too seldom accorded to him. In the time of the Organon the ordinary routine treatment of the insane was as barbarous and revolting as it was ineffective.

199

No other diseases require any special directions for their cure. They obey, all of them, the eternal law of homœopathy, to which there is no exception.

200

Hitherto, then, we have reviewed those circumstances of the disease which have the greatest bearing upon the choice of the homœopathic remedy. Now we pass to the special laws of rational treatment in the mode of employing the remedy.

201

Every improvement in an acute or a chronic disease, however small it be, provided it is definitely progressive, is a condition which absolutely forbids any further administration of any medicine as long as it lasts. This is because the good is not yet exhausted which the dose of medicine already taken can effect, and any

fresh dose of any medicine would disturb the process of improvement.

202

This admonition is the more important because the exact time-limits of the action of remedies is hardly known with certainty in any single case. Therefore, so long as improvement continues, so long must we assume that, at least in this case, the period of action of the remedy is not exhausted.

Author's note.—Some remedies seem to exhaust their power in about twenty-four hours, but not many; others take a few days or a number of days, some even weeks, to complete their effects.

203

Hence it follows that, when the remedy is exactly homœopathic in its action the amelioration will persist even after the time of action of the drug is expired. The good work will not be interrupted even if a second dose is not given until several hours (or, in chronic diseases, actually days) have elapsed after the period of remedial action has ended. The part of the disease already destroyed will not be renewed, and improvement will remain remarkably evident even without the administration of another dose.

204

When the continuous improvement that follows the first dose of the remedy homœopathically appropriate to the disease does not go on to the complete restoration of health (as it often will), the stationary period that ensues indicates generally the limit of action of the given remedy. Before this time it is needless

and unreasonable, nay, it may be positively harmful, to repeat the dose.

205

Even the remedy which has proved so helpful may do nothing but harm if repeated before improvement has come to a standstill in all respects; because until then the counter-force is no longer necessary in such measure as a new dose would supply. Indeed, in a disease which is easily influenced and not chronic, the first dose of the best selected medicine will have already caused in the course of its own active period all the good, all the desired alterations which the physician can achieve for the moment —all the health attainable for that time, in fact; another dose of the same drug given before the period of action of the first is ended would alter this advantageous condition, and therefore must do harm, causing a medicinal disease to be mingled with the remaining natural symptoms, causing, in fact, both a change and an aggravation of the disease.

Author's note.—Failure to observe this rule is punished by an aggravation of the disease, which either becomes more threatening or slower to recover.

206

When there comes an end to the improvement, which has gone steadily forward though not to complete recovery, a precise examination of the present improved aspect of the disease will show a small and altered symptom-group, to which a second dose of the former medicine would no longer be suitably homœopathic. Another counter-force is required, more adapted to the remaining phenomena of the disease.

207

If, consequently, the dose of a remedy that has been chosen with all care cannot complete the restoration to health within the period of its activity (as in most cases of recent disease it can), obviously nothing better can be done for the remaining, though much ameliorated, malady than to give a dose of another remedy chosen for its exact suitability to the symptoms still unremoved.

208

Only when a disease of a threatening type shows no improvement, or still more when the condition has grown slightly worse, must a dose of another remedy exactly adapted to this stationary or aggravated state of disease be given before the end of the active working-time of the first medicine, which has shown by its failure that it was not homœopathic to the case.

209

Even more certainly the keen-sighted physician who has a clear perception of the disease condition, as soon as he realizes that he was mistaken in the choice of the remedy last given (this in urgent cases will be evident after six, eight or twelve hours), and observes the state of the patient growing clearly, even though only slightly, worse from hour to hour, is not only permitted, but compelled by his duty, to correct his error by the choice of a new remedy which shall be not only tolerably suitable, but absolutely the one best adapted to the existing state of disease.

210

Even in chronic diseases it is seldom really desirable to give the same medicine a second time, even after the active period of the first dose has expired, and this is particularly true at the commencement of treatment.

211

When a single thoroughly suitable specific medicine cannot immediately be found it is generally best to give as intercurrent remedies one or two medicines chosen on the ground of the characteristic original disease-symptoms. These drugs, used alternately with the principal remedy, although insufficient in themselves to achieve a cure, yet forward it more surely than does the repetition once or twice of the original medicine, which, being chosen in accordance with the fundamental disease-symptoms, was reasonably held to be the most suitable, and yet proved not so completely adapted to the case as to cure it without further aid.

212

If, however, it should be found that the best result follows the continued administration of the first-selected medicine (as may be the case when the counter-force is remarkably similar to the chronic disease-force), then, while each successive dose is left to act for the whole period of its effective power, a smaller quantity should be given each time, so as not to disturb the process of the improvement, but rather to take the case along the shortest path to the desired end of recovery.

213

So soon as the chronic disease (a disease, say, of ten, fifteen or twenty years' standing) has

yielded to a single completely suitable (or specific) remedy, or to a remedy as nearly adapted to the case as possible (aided perhaps by the intercurrent use of the next most appropriate medicine), then after three or six months the principal remedy must again be given at intervals first of one week and later of several weeks, each successive dose being smaller than its immediate predecessor, until all tendency of the organism to relapse into its chronic disease has been extinguished.

214

The careful observer recognizes the exact moment for the repetition of the dose when one or other of the original disease-symptoms reappears in a mild degree.

215

But if it is found that this procedure is not thoroughly effective, and that the patient is only kept from a relapse by the use of doses as big as, or bigger than, the first dose of the remedy, then, although these doses are still followed by good results, we have a sure sign that the cause that produced the disease is still at work, and that there is some circumstance in the mode of life or the surroundings of the patient which must be changed before a permanent cure can be made.

216

Among the signs which give evidence in all diseases (especially in acute diseases) of a slight improvement or worsening not perceptible to every one, the surest and most illuminating are those that concern the condition of the patient's mind and his demeanour. In the case of even

a very slight change for the better there appears a greater sense of ease, increasing calmness and freedom of spirit; a kind of return of the natural healthy state. On the other hand, the signs of the slightest change for the worse are exactly opposite; a more constrained, uneasy, self-pitying condition of mind and spirit, of the whole demeanour, and of all the postures and actions, a condition noted by close observation more easily than it can be described in words.

217

The other new symptoms, either of improvement or the contrary, soon leave no doubt in the mind of the observant and attentive physician of the course the disease is taking. But there are patients who are either unable or unwilling to give an account, whether of improvement or worsening, so that their mere statements are of little value without other evident signs.

218

But even with such persons conviction is easily attained when we realize that, if no new signs of disease appear after the use of the remedy, and if the patient complain of no new symptoms hitherto unexperienced, then the medicine must either have brought about a thorough change for the better, or be about to cause such a change when more time is allowed to develop it. On the other hand, if the patient relates this or that new occurrence or important symptom (the sign that the exact homœopathic remedy has not been chosen), then, although he may assure us in a good-natured way that he feels better, we must not put any confidence in this assurance, but must regard his condition as

a more serious one, and the evidence of this fact will before long be forthcoming.

219

As certain symptoms of medicines, when tested on healthy human beings, appear several hours or even several days later than other symptoms, so they cannot remove the corresponding symptoms in disease except after a corresponding lapse of time, however speedily they destroy symptoms of a different order, a fact which need not surprise us.

Author's note.—Thus the tendency of mercury to cause deep circular ulcers with inflamed and tender margins does not show itself in the provings for some days or even weeks. Similarly it will not cure such ulcers in the first few days.

220

If we have the choice we should prefer for the cure of chronic diseases medicines of long duration of action; and medicines of a short active period for the rapid acute cases, that is, diseases which tend to frequent changes of condition.

221

The reasonable physician will take pains to avoid making favourite remedies of those which, from being frequently indicated, have chanced to be frequently useful to him. For if he does so he will often neglect some rarer remedies which would in certain cases have served him better.

222

Further he will not from a mistrustful weakness of judgment despise any remedies, because they have failed him when given without suitable

indications. He will not avoid them without good reasons, being mindful of the truth that only that remedy deserves respect and preference among the counter-forces of disease which corresponds most exactly to the symptom-picture of any given case, and that no paltry prejudices should influence his serious choice of the best medicine for his purpose.

223

If we bear in mind the necessary and desirable smallness of the doses required in homœopathic practice it is easy to understand that during treatment every substance in the diet which might act in any medicinal way must be forbidden, so that the minute dose shall not be overpowered or extinguished by some artificial irritant.

224

This careful enquiry into possible hindrances to cure is the more important in chronic diseases, because such disorders commonly originate, at least partly, in the harmful influences just mentioned and in other errors in the mode of life which, though unrecognized, are often harmful. When they do not so originate they are all the more difficult to treat.

Translator's note.—Here follows a long list of articles of diet and circumstances of life that may be harmful. Coffee and tea rank high in Hahnemann's judgment as noxious influences.

225

The most appropriate regimen to accompany the medicinal treatment of chronic diseases consists in the removal of such hindrances to recovery and the prescription of such opposite

conditions as are necessary; exercise in the fresh air; simple, suitable and unspiced food and drink; surroundings uplifting to the spirit, etc.

226

In acute diseases, on the other hand (except conditions of actual delirium), the subtle and unerring perceptions of the life-instinct which are then aroused speak so clearly and definitely that the physician need only warn nurses and attendants to offer no opposition to this voice of nature either by refusing the patient anything that is strongly desired, or by persuading him to take anything that his instinct may reject.

227

Certainly the desires of the patient suffering from an acute disease are chiefly for such food and drink as give palliative relief; they are not, as a rule, of a medicinal character, and they merely supply a kind of need. Any slight hindrance to the radical removal of the disease which the moderate gratification of these desires might cause is easily counteracted and overborne by the suitable homœopathic remedy and by the life-force thereby liberated.

228

The reasonable physician must have to his hand the strongest and most genuine medicines before he can have confidence in them as counter-forces (remedies). He must convince himself of their genuine character.

229

It should be a matter of conscience with him to assure himself without any doubt, in every case, that the patient receives the correct and genuine medicine.

230

The medicinal powers of indigenous plants or of those that can be obtained in a fresh state are obtained most completely and certainly, when their freshly expressed juice is immediately mixed with an equal part of spirits of wine; such preparations retain their strength, wholly and always, unimpaired if they are kept in a dark place in well-stoppered glass bottles.

Author's note.—Although equal parts of alcohol and freshly expressed juice form the best preparations for effecting the precipitation of albuminous matter and preventing all possible fermentation and deterioration, yet for plants which contain much thick mucus or a superfluity of albumen (*e. g.* symphytum, viola tricolor, æthusa cynapium, solanum nigrum, etc.) a double quantity of spirit of wine is commonly desirable. When this has stood in a close-stoppered bottle for a day and a night the precipitated albuminous material can be filtered off and the clear preparation kept for therapeutic use.

231

Other plants, which are exotic, or cannot be obtained in a fresh state, should never be taken on trust in a powdered state. The reasonable physician will convince himself of their genuineness by handling them in their untouched whole condition before he makes any use of them as medicines.

Author's note.—Certain precautions are necessary in order to keep these drugs in the state of powder. The whole and untouched plants even when fully dried always retain a certain quantity of water, not sufficient indeed while the substance remains whole and unpowdered to impair its

dryness and promote decomposition, but far more than sufficient when the substance is in its fully divided condition. When powdered they will decompose and become mouldy unless this moisture is driven off. Animal or vegetable drugs, stable enough in the entire state, will not furnish a stable unchangeable powder unless this extra moisture is got rid of. This is best done by drying the powder over a water-bath till all the small pieces of it are as easily separated as fine sand and readily fall to dust. In this condition it can be kept for ever in sealed bottles. All vegetable and animal preparations not preserved in air-tight vessels gradually lose more and more of their medicinal power.

232

As every medicine acts most definitely and effectually in solution the wise physician will administer all medicines in this way, except those whose nature requires that they be given in the powdered form. All other preparations but these make the comparison of observations difficult and the estimation of the dose of every powerful medicine uncertain.

233

Metals, salts, and other preparations of this kind, whose purity cannot be recognized without elaborate tests, should only be used by the rational and responsible physician when they have been prepared under his own eyes.

234

In no case is it necessary for cure to use more than one single simple medicinal substance at a time.

235

It is difficult to conceive how there could ever be the smallest doubt that it is more logical and reasonable to prescribe a single tested medicine for a disease than a mixture of several.

236

For the rational physician finds at once all that he can desire in quite simple medicines given singly, artificial disease-producing powers, which by their homœopathic might can overcome, extinguish and radically cure natural diseases. Therefore he will always act according to the general maxim: "Quod fieri potest per pauca non debet fieri per plura"; and he will never use as remedies anything but single simple medicines. It is wholly unknown how two or more medicines mixed together may hinder and alter one another in their actions on the human body; on the other hand, a simple medicine used in diseases whose symptom-complex is exactly known, will cure, if it is exactly and homœopathically adapted to the case; and at the worst, if it is not rightly chosen and cannot therefore be of service, its use can yet add to our knowledge of drugs, because the new symptoms excited by it in such a case afford confirmation of those which the drug has already shown in experiments on the healthy.

237

If a medicine is exactly and specifically chosen and fully homœopathic to a case of disease, then it will affect the original disorder favourably, even if given in too large a quantity; but there will be an unnecessary and over-powerful impression made on the organism through the excessive size and intensity of the dose.

238

For if the change in the organism produced by the overdose of the remedy, homœopathic as it was to the original disease, be too violent, then besides the increase in the homœopathic aggravation (S. 132) there follows an unnecessary weakening of the patient after the active period of the drug has ended. Further, if the dose was very excessive, then after the increased primary drug-symptoms (S. 132) there ensue symptoms of its secondary action, a kind of medicinal after-disease of an opposite character to the first.

239

As at the present date hardly any medicine can be found that is so completely homœopathic to a case of disease as to correspond to it exactly and mathematically in each and every point (S. 131, note), so the new symptoms, which were unimportant when a small dose was given, are aggravated into severe maladies of many kinds when the dose is too considerable.

240

For these and many other reasons the reasonable physician (who always follows the best method in practice because it is the best, and refuses to depart from it at the bidding of blind custom) will choose only the most suitable dose of the indicated remedy, so that hardly a sign of aggravation of the disease will be aroused (S. 132); that is, will choose a dose which as a counter-force only just exceeds the disease-force against which it is directed.

241

This apparent aggravation and increase of the existing disease which results from the use of the homœopathic remedy should be hardly perceptible, and then only in the first hour or two after its administration.

242

One of the chief laws of homœopathic therapeutics is the following: the counter-force chosen as exactly as possible for the removal of a natural disease-force should be so calculated that it will only just attain its object and will do the body no harm in any way through unnecessary strength.

243

Now, as the smallest quantity of medicine naturally disturbs the organism least, we should choose the very smallest doses, provided always that they are a match for the disease.

244

Universal experience has shown that the very smallest doses of drugs chosen for their homœopathicity to diseases are a match each for the corresponding disorder. For if the disease does not manifestly arise from a serious morbid change in some important organ, hardly any dose of the homœopathically selected remedy can be so small as not to be stronger than the natural disease and so overcome it.

245

The ordinary observer has no conception how extraordinarily sensitive the body becomes to drugs when it is diseased, and especially to drugs chosen homœopathically.

246

Therefore every patient is in the highest degree susceptible to suitably applied medicinal forces. There is no person, however robust, even though only suffering from a chronic or so-called local disease, who will not soon feel the desired change in the affected part if he takes the helpful and homœopathically chosen medicine even in the smallest dose imaginable—who will not, in a word, be much more affected thereby than would a day-old but healthy infant.

247

This being the case, the true physician will pursue the rational course and give the chosen homœopathic remedy in just so small a dose as will overcome and destroy the existing disease without further ado. A dose so small will reduce to its lowest limits any possible harm that might result from a failure to select the exact remedy at the first choice, a possibility that must always be reckoned with since human abilities may easily err. At the worst, even if the wrong drug be administered, the smallness of the dose will render it far too weak to resist the natural energy of the body and the swift opposition of the more exactly adapted homœopathic remedy, by the use of which the initial mistake will be rectified, and any small ill effects of that mistake extinguished.

248

The fact that one dose, or a little more, of a certain homœopathically chosen medicine usually overcomes and destroys the analogous disease, and that every dose which is unnecessarily powerful affects the body more than is required, explains the following important observation,

which holds good in most cases: namely, that a certain quantity of a remedy has a more powerful effect when given at intervals in divided doses than when given all at one time.

249

Eight drops of almost any medicinal tincture given in one dose have only a quarter of the effect of eight drops of the same tincture given every four hours or every two hours in drop doses.

250

If dilution is also employed (whereby the dose gains a greater power of expansion), an excessive effect is easily produced. But there is no small difference in the effects of a dilution which is, as it were, only superficial and a dilution which is so intimate and uniform that every smallest part of the fluid medium contains a due proportion of the dissolved medicine; the former is much less powerful than the latter.

251

Thus the intimate mixture produced by adding a single drop of a tincture to a pound of water and shaking vigorously, if administered in doses of two ounces every two hours, will produce more effect than a single dose of eight drops of the tincture.

252

From the experience last mentioned, that the power of a medicine in solution is much increased by intimate mixture with a large volume of fluid, it follows undeniably that, in order to make the dose of the homœopathic remedy as small as is possible and necessary it must be given in the smallest possible bulk.

253

Moreover, the strength of action of a dose does not vary in exact proportion to its quantity. Eight drops of a tincture given in one dose do not produce four times the effect of two drops, but only about twice the effect. A mixture of one drop of a tincture with ten drops of an unmedicated fluid, given in drop doses, will not produce ten times the effect of drop doses of a mixture ten times as dilute, but only about (or scarcely) twice the effect, and so on in the same ratio, so that even a drop of the highest dilution must possess, and does in fact show, a very considerable power.

254

The action upon the living human body of the remedial counter-force which constitutes a medicine is so profound and spreads from those sensitive areas well supplied with nerves, to which it is first applied, throughout the whole organism with such inconceivable rapidity and completeness that this action must be called spirit-like. It is almost as spirit-like as the action of vitality itself, by which its power is reflected on the organism. Drug-action borrows a kind of life from the power of response to specific impressions, the sensitiveness, and irritability, possessed by living bodies.

255

Every part of our bodies that possesses the sense of touch is able to receive the influence of medicine and distribute its power all over the other parts of the organism.

256

The tongue, mouth and stomach are certainly the parts most sensitive to medicinal impressions,

and drugs applied to these regions, especially in solution, act with greater power and rapidity on all points of the body.

257

The interior of the nose, and the rectum, as well as parts denuded of skin, wounded or ulcerating surfaces, permit an action of medicines on the whole organism which is nearly as penetrating as if the drugs had been taken by the mouth.

258

On the other hand, the external surfaces of the body covered with epidermis are less adapted to receive the action of medicines. The most sensitive parts, it is true, allow a certain amount of drug power to pass to the nerves and from them to the whole body, but far less than the amount that so passes when the drug is taken by the mouth or injected into the rectum.

259

Therefore in certain cases, where the needful medicine cannot be given by the mouth (although, even if it cannot be swallowed, the mere taking of the drug into the mouth cavity often produces the full medicinal effect), and where it is not convenient or desirable to give it by the rectum, in such cases, I say, if the patients are quick of response to medicines, the mere external application of the drug in solution to the most sensitive external parts (*e. g.* the pit of the stomach, or the lower abdomen) will often achieve a result not much inferior to that obtained when the drug is given internally. But the medicine must for this purpose be used in a stronger form and spread over a large surface;

and, if this proves not enough, it should be rubbed in, or administered (in still stronger solution) by means of baths to the whole or part of the body.

Author's note.—Rubbing in seems to heighten the action of medicines by making the skin more sensitive to the medicinal force which is thence communicated to the whole body. If friction be used to the under part of the thigh, then the mere subsequent application of mercurial ointment is as effective as if the ointment itself had been rubbed in.

260

Among causes which have given rise in general practice to the use of large doses the employment of drugs as palliatives ranks highest.

Author's note.—How exactly opposite are the methods of using drugs as palliatives and using them homœopathically, is shown by the fact that in the first method as much of the drug is needed as can be borne, and in the second as little as it is possible to give consistently with producing the desired effect.

261

By the palliative use of drugs, which is the exact opposite of the homœopathic art of healing, the attempt is made to overcome certain symptoms of disease by means of certain known symptoms of medicines.

262

As by means of medicines so used the condition produced is not in the least similar to that of the disease (as it is with the homœopathic method), but the exact contrary; so there ensues

on such drug-administration not the least initial (apparent) aggravation, but on the contrary an almost immediate improvement in the patient's symptoms. In the first hour after receiving a palliative the patient feels himself much relieved, a sensation that practically never occurs after the administration of the homœopathic remedy.

263

Under the homœopathic remedy the whole disease-condition is quickly vanquished, extinguished, and destroyed (not in the first hour certainly, but later on in gradually increasing measure) by the counter-force of the specific medicine. But with a palliative, given according to the law, *contraria contrariis curentur*, only one single symptom of the disease is relieved, quickly, by the exactly opposed symptom of the drug; perhaps because the opposites by a kind of mutual fusion neutralize one another dynamically (though only for a time), and in this way the disease-symptom loses its influence on the organism as long as the power of the opposed medicinal symptom lasts.

264

The original malady seems to disappear at once at the beginning of the palliative treatment. But it is not removed, not extinguished; as soon as the opposed action of the palliative is exhausted and ceases to work (which takes place in a few hours or days), the malady returns, with an intensity actually increased by the addition of the after-effects ("secondary" symptoms) of the palliative, which (being opposed to the "primary" symptoms) are very like the original disease-symptoms and thus seriously and permanently aggravate the patient's condition.

265

Palliative treatment follows a course quite contrary to that of homœopathic treatment in that the patient is most relieved in the first hour after receiving the medicine, less in the second hour, still less in the third, and so on, until with the cessation of action of the primary opposite drug-symptoms the tendency to secondary action sets in and the patient becomes worse than he was before the palliative was administered.

266

Now, in order to renew the deceptive improvement, it is necessary to increase the dose of the palliative continually, often to give very large doses of it, because each successive dose has to cover up not only the natural disease-symptoms, but also the aggravation of the disease-condition which results from the secondary action of the previous dose.

267

Unless the dose of the palliative is increased, the temporary improvement becomes continuously less, and finally imperceptible, and there follows an increased aggravation of the disease.

268

Every medicine is a palliative (antagonistic and contrary in action to a principal symptom of disease) when it only relieves in doses which have to be continuously increased.

Author's note.—The irrational character of palliative treatment is self-evident, for the patient requires a radical cure, not a temporary, illusory improvement which ends in a strengthening of the original malady. Such treatment is also

mistaken, because by it only one symptom is attacked and that often only the twentieth part of the disease and of its whole complex of phenomena. In other words palliative treatment is treatment which is symptomatic and not remedial. It was fortunate that so little was known of the individual symptomatology of drugs; otherwise too frequent a use might have been made of them for the purpose of combating opposite conditions. There remained but few actions of this kind available. Coffee was given for a tendency to drowsiness; the primary power of opium to constipate was used for diarrhœa, even of a chronic kind; its action in causing a heavy stupefying sleep was used for chronic wakefulness, and the state of insensibility and stupor which it can extend over the whole sensorium was employed to relieve every imaginable kind of pain; the tendency to constipation was treated with large doses of irritating purgatives and laxatives that caused frequent evacuations; a deficiency of body-heat and so-called weakness of the stomach were remedied by stimulating spices and alcoholic drinks; inflammation by cooling substances; heat of the body by blood-letting; even chronic cases of almost complete paralysis of the bladder were energetically attacked with the powerful irritant action of cantharides, etc. But experience showed, often too late, how seldom health was thereby restored, and how frequently increased disease or worse ensued.

269

Only in the emergencies most threatening to life, *e. g.* asphyxia, coma from lightning-stroke or suffocation, freezing, and so forth, is it permissible and desirable to restore, at least as a

preliminary measure, the sensibility and power of response to stimuli (the physical life) by means of strong coffee, or gentle electrical shocks, or some stimulating strong-smelling application, and so gain time until, if necessary, a homœopathic remedy can be chosen for the condition. To this category belong also the different antidotes to acute poisonings.

270

Further, a homœopathic remedy is not to be regarded as unsuitably chosen if a few of its symptoms are only palliatives (*antipathic*) to some of the less important minor symptoms of the disease, provided only that the other, and especially the well-marked, individual and characteristic principal symptoms of the disease are met and covered by the same remedy *homœopathically*, i. e. through resemblance of drug to malady.

271

In such a case none of the ill consequences are seen which generally follow the one-sided palliation of a single disease-symptom. Complete recovery ensues without accessory symptoms or after-troubles, but in such a way that those symptoms which were here attacked only by the opposed (palliative) symptoms in the sphere of action of the medicine, usually do not disappear until the drug's action is entirely completed.

Translator's note.—Here follows a long note of Hahnemann's, explaining another method of treatment often adopted in his day, which demanded large doses of drugs. It consisted in administering remedies calculated to act not directly against the disease-symptoms, but on

other parts of the body. Thus skin-diseases would be treated with purgatives and all the class of counter-irritants. Blisters, setons and bleeding belong to this category of remedies. Hahnemann points out that, although the disease-symptoms are sometimes lessened at first by this method, they usually return as soon as the "revulsive" treatment so-called is superseded.

Author's note.—Employing the homœopathic method, the rational physician will very seldom find it necessary to employ the drastic method of evacuations, upwards or downwards, except when quite indigestible or foreign or poisonous substances have been taken into the stomach or bowels.

Sometimes the use of some undynamic (non-homœopathic) remedies is useful. Such are fatty substances which mechanically or physically loosen the compactness and solidity of fibres: tannin which thickens living fibres almost as much as it does dead ones; charcoal which lessens the evil odour of unhealthy parts of the living body just as it destroys that of dead things: chalk, alkalies, soap, and sulphur, which can chemically decompose and so neutralize and render harmless corrosive acids and metallic salts in or on the human body; acids and alkalies, which may influence concretions in the bladder; the actual cautery and caustics of various kinds. The use of blood-letting, or of leeches, which as a rational procedure is rarely indicated, need not be expounded here.

PREFATORY NOTE TO PART II

HAHNEMANN was a ready and prolific writer, and his own works, apart from his numerous translations of medical works, form a long list. From the lesser writings, as collected by Dr. Robert Dudgeon and translated by him into English, I have selected four as a kind of supplement to the Organon. The first three appeared in *The Friend of Health*, of which two parts were published, the first in 1792 and the second in 1795. They have a very real value even to-day, and that in two ways. First of all they testify strongly to the keen observation, the shrewdness and the essentially practical nature of Hahnemann, a man as far removed as possible from the dreamer or impostor for which he is sometimes ignorantly taken. In days when the science of public health did not exist, when Bacteriology and all the light which it throws upon infection and immunity was unknown, careful observation and shrewd deduction alone led Hahnemann to formulate these suggestions (far too much in advance of his age to be accepted), of which it is not too much to say that by far the greater part of them would hold good to-day, and in a country where the latest resources of civilization are unavailable

most of his plans could be followed with nothing but advantage.

But these three essays have another interest, and that is an historical and sociological one. For both by the things Hahnemann recommends and the things he discountenances, and by the conditions he assumes, we catch glimpses of the state of society at the end of the eighteenth century, the manner of life and the daily surroundings of the German people, which are both deeply interesting to the curious and valuable to the sociologist. The fourth essay, *Æsculapius in the Balance*, was written in 1805, and forms an admirable preface to the Organon, inasmuch as it gives more than a hint of the chaotic state of medicine into which the Organon attempted to bring some order. It, too, has its sociological value, especially in its glimpses of the relations of doctors and apothecaries and of the methods of ordinary treatment; but beyond this it throws a light on one great reason for the ill-will which Homœopathy aroused, by clearly showing how powerful were the vested interests directly threatened by Hahnemann's theories and practice. Vested interests inevitably fight for survival and attack those that come into conflict with them with rancour and persistence. It was not the least of the misfortunes of Hahnemann that, by their very nature, his doctrines aroused this opposition; but it is not altogether to the credit of the judgment of later generations that the rancour which arose from a threatened monopoly should remain to cloud and prejudice

a reasoned enquiry, long after the monopoly was overthrown. The essay *Æsculapius in the Balance*, therefore, will always retain more than merely an historical interest. The translations are those of the late Robert Ellis Dudgeon, M.D., whose long life was a constant endeavour to honour the memory of Hahnemann and extend the scope of his doctrine, and to whose memory I should wish to dedicate this reprint of some of his work.

C. E. W.

PART II

PROTECTION AGAINST INFECTION IN EPIDEMIC DISEASES

For every kind of poisonous exhalation there is in all probability a particular antidote, only we do not always know enough about the latter. It is well known that the air of our atmosphere contains two-thirds of a gas that is immediately fatal to man and beast, and extinguishes flame. Mixed up along with it is its peculiar corrective; it contains about one third of vital air, whereby its poisonous properties are destroyed; and in that state only does it constitute atmospheric air, wherein all creatures can live, grow and develop themselves.

The suffocative and flame-extinguishing exhalations in cellars in which a quantity of yeast or beer has fermented, is soon removed by throwing in fresh slaked lime.

The vapour developed in manufactories where much quicksilver is employed, together with a high temperature, is very prejudicial to health; but we can in a great measure protect ourselves against it by placing all about open vessels containing fresh liver of sulphur.

To chemistry we are indebted for all these protective means against poisonous vapours, after we had discovered, by means of chemistry, the exact nature of these exhalations.

But it is quite another thing with the conta-

gious exhalations from dangerous fevers and infectious diseases. They are so subtle that chemistry has never yet been able to subject them to analysis, and consequently has failed to furnish an antidote for them. Most of them are not catching at the distance of a few paces in the open air, not even the plague of the East; but in close chambers these vapours exist in a concentrated form and then become injurious, dangerous, fatal, at a considerable distance from the patient.

Now as we know of no specific antidotes for the several kinds of contagious matters, we must content ourselves with general prophylactic means. Some of these means are sometimes in the power of the patient, but most of them are solely available by the nurse, the physician, and the clergyman, who visit the sick.

As regards the former of these, the patient, if not too weak, may change his room and his bed every day, and the room he is to occupy may, before he comes into it in the morning, be well aired by opening the doors and all the windows. If he have curtains to his bed he may draw them to, and let the air circulate once more through his room, before the physician or clergyman comes to visit him.

The hospitals used by an army in a campaign, which are often established in churches, granaries, or airy sheds, are for that reason much less liable to propagate contagion, and also much more beneficial for the patients than the stationary hospitals, which are often built too close, low, and angular. In the latter, the nurses, physicians, and clergymen often run great risks. And what risks do they not constantly run in the half-underground damp

dwellings of the lowest class of the people, in the dirty cellars of back courts and narrow lanes that the sun's reviving rays never shine in, and the pure morning air never reaches, stuffed full with a crowd of pauper families, where pale care, and whining hunger seem for ever to have established their desolating throne!

During the prevalence of contagious diseases the poisonous qualities of the vitiated air are concentrated in such places, so that the odour of the pest is plainly perceptible, and every time the door is opened, a blast of death and desolation escapes. These are the places fraught with greatest danger to physician and clergyman. Is there any mode whereby they can effectually protect their lungs from the Stygian exhalation, when the crying misery on all sides appeals to them, shocks them, and makes them forgetful of self? And yet they must try to discover some preventive! How are they to do so?

I have said above, that we may gradually accustom ourselves to the most poisonous exhalations, and remain pretty well in the midst of them.

But, as it is the case with accustoming ourselves to everything, *that the advance from one extreme to the other must be made with the utmost caution, and by very small degrees*, so it is especially with this.

We become gradually accustomed to the most unwholesome prison cells, and the prisoners themselves with their sighs over the inhuman injustice of their lot, often, by their breathing and the exhalations from their bodies, gradually bring the few cubic feet of their atmosphere into a state of such pestilential malignity, that strangers are not unfrequently struck down by

the most dangerous typhoid fevers, or even have suddenly died by venturing near them, whilst the prisoners themselves, having been gradually accustomed to the atmosphere, enjoy a tolerable health.

In like manner we find that physicians who see patients labouring under malignant fevers rarely and only occasionally, and clergymen whose vocation only requires them to pay a visit now and then, are much more frequently infected than those who visit many such cases in a day.

From these facts naturally proceeds the first condition for those who visit such sick-beds for the first time, "that they should in the commencement rather see their patients more frequently, but each time stay beside them as short a time as possible, keep as far away as possible from the bed or chamber utensil, and especially that they should take care that the sick-room be thoroughly aired before their visit."

After these preliminary steps have been taken with proper caution and due care, we may then, by degrees, remain somewhat longer, specially beside patients with the slighter form of the disease, and of cleanly habits; we may also approach them sufficiently close to be able to feel their pulse and see their tongue, taking the precaution when so near them, to refrain from breathing. All this can be done without any appearance of affectation, anxiety, or constraint.

I have observed, that it is usually the *most compassionate, young* physicians, who, in epidemics of this sort, are soonest carried off, when they neglect this insufficiently known precaution, perhaps from excessive philanthropy and anxiety about their patients; that on the other

hand, the hard-hearted sort of every-day doctors who love to make a sensation by the large number of patients they visit daily, and who love to measure the greatness of their medical skill by the agility of their limbs and their rapidity, most certainly escape infection. But there is a wise middle path (which young clergymen who visit the sick are counselled to adopt), whereby they may unite the most sensitive and warmest philanthropy with immunity to their own precious health.

The consideration "that a precipitate self-sacrifice may do them harm but cannot benefit the patient, and that it is better to spare one's life for the preservation of many, than to hazard it in order to gratify a few," will make the above first precaution acceptable, viz.—*by very gradually approaching and accustoming ourselves to the inflammatory material of the contagion, to blunt by degrees our nerves to the impression of the miasm* (morbid exhalation) *otherwise so easily communicable.* We must not neglect to impress the same precautionary measures on the attendants of the sick person.

The second precaution is "that we should, when visiting the patient, endeavour to maintain our mind and body in a good equilibrium." This is as much as to say, that during this occupation we must not permit ourselves to be acted on by debilitating emotions; excesses in venery, in anger, grief and care, as also over-exertion of the mind of all sorts, are great promoters of infection.

Hence to attend either as physician or clergyman a dear friend sick of the prevalent fever is a very dangerous occupation, as I have learnt from dear-bought experience.

We should endeavour moreover to preserve as much as possible our usual mode of living, and whilst our strength is still good we should not forget to take food and drink in the usual manner, and duly apportioned to the amount of hunger and thirst we may have. Unusual abstinence or excess in eating and drinking should be carefully avoided.

But in this respect no absolute dietetic rules can be laid down. It has been said that one should not visit patients when one's stomach is empty, but this is equally erroneous as if it were to be said one should visit them with an empty stomach. One who like myself is never used to eat anything in the forenoon, would derange his digestion and render himself more susceptible of infection were he, following the old maxim, to eat something for which he had no appetite and visit his patients in this state; and *vice versâ*.

On such occasions we should attend more than ordinarily to our desires for particular articles of diet, and procure if possible that for which we have most appetite, but then only eat as much as will satisfy us.

All over-fatigue of the body, chills and night-watchings, should be avoided.

Every physician who has previously been engaged in practice, every clergyman and nurse, will of course have learned to get over the unnecessary repugnance he may feel.

Thus we become gradually habituated to the occupation of tending patients suffering from malignant fevers, which is fraught with so much danger and cannot be compensated by any amount of pecuniary remuneration, until at length it becomes almost as difficult to be in-

fected at all as to get the small-pox twice. If under all these circumstances we retain our courage, sympathizing compassionate feelings, and a clear head, we become persons of great importance in the state, not to be recompensed by the favour of princes, but conscious of our lofty destiny and rising superior to ourselves, we dedicate ourselves to the welfare of the very lowest as well as the highest among the people, and we become as it were angels of God on earth.

Should the medical man experience in himself some commencing signs of the disease, he should immediately leave off visiting the patient, and if he have not committed any dietetic or regiminal error, I would recommend, notwithstanding I have endeavoured in this book to avoid anything like medicinal prescriptions, the employment of a domestic remedy, so to speak, empirically.

In such cases I have taken a drachm of cinchona bark in wine, every three-quarters of an hour, until all danger of infection (whatever kind of epidemic fever the disease might be) was completely over.

I can recommend this from my own experience, but am far from insisting upon the performance of this innocuous and powerful precaution by those who are of a different opinion. My reasons would be satisfactory if I could adduce them in this place.

But as it is not enough to protect ourselves from infection, but also necessary not to allow others to come in the way of danger through us, those who have been engaged about such patients should certainly not approach others too nearly until they have changed the clothes they

had on when beside the patients for others, and the former should be hung up in an airy place where no one should go near them, until we again need them to visit our patients. Next to the sick-room, infection takes place most easily by means of such clothes, although the person who visits the patient may not have undergone any infection.

A highly respectable and orderly individual who for years had never walked anywhere, but only to his office at the fixed hours, had a female attendant with whom he was on very friendly terms, an old good-natured person, who without his knowledge employed all her leisure hours in making herself useful to a poor family living about a hundred yards from his house, who were lying sick of a putrid fever, the prominent character of which was a malignant typhoid fever. For a fortnight all went on well; but about this time the gentleman received some intelligence of a very annoying and depressing character, and in a few days, although to my certain knowledge he had seen no one affected with such a disease, he got, in all probability from the clothes of his attendant who was often very close to him, exactly the same kind of malignant fever, only much more malignant. I visited him as a friend with unreserved sympathy as I ought, and I fell sick of the same fever, although I had been already very much accustomed to infection.

This case, together with many other similar ones, taught me that clothes carry far and wide the contagious matter of such fevers, and that depressing mental emotions render persons susceptible to the miasm, even such as are already used to its influence.

It would appear that the lawyer who draws up a will, the notary and the witnesses would, on account of not being habituated to such impressions, run much greater risk of being infected in these cases. I do not deny it; but for them there are modes of escape which are not so accessible to the other persons of whom we have spoken.

Where there is nothing, the sovereign has lost his rights, there is no will to be made. But when wealthy persons wish to make their last will and testament on their sick bed, there are two circumstances in favour of the lawyer and his assistants. As in the formalities of a legal testament, the patient's bed often cannot remain in its usual situation, and as moreover it is essential for such a testament that the testator should be in full possession of his intellectual faculties, it follows that for those patients *who are not absolutely poor* another room and another bed may be got ready, thoroughly aired and free from infectious atmosphere. They do not need to remove thither until all this has been properly performed a short time before.

The weakness of the intellect in such patients generally keeps pace with their corporeal weakness, and a patient who possesses sufficient strength of intellect to make his will would not allege that he is too weak to be removed to another bed and room.

How little chance there is of the legal officials catching the infection under these circumstances (provided they take moderate care not to approach the patient nearer than necessary), I need not dwell upon.

I should mention that after one has once accustomed himself to any particular kind of

miasm, for example the bloody flux, the nerves remain for a considerable time, often for years, to some degree insensible to the same kind of disease, even though during all that time we may have had no opportunity of seeing patients affected with that disease, and thus as it were of keeping the nerves actively engaged in keeping up this state of specific unsusceptibility. It gradually goes off, but more slowly than one would suppose. Hence with moderate precaution, a nurse, a physician, or a clergyman, may attend dysenteric patients this year if they have had to do with similar patients several years previously. But the safest plan is to employ even in this case a little blameless precaution.

But as the superstitious amulets and charms of our ancestors' times did harm, inasmuch as full credit was given to their medicinal virtues, and better remedies were consequently neglected, so for like reasons the fumigations of the sick room with the vapour of vinegar, juniper-berries and the like, is inadvisable, although the majority of my colleagues highly recommend it, and assert that the most infectious miasms of all kinds have thereby been overpowered and driven away, and thus the air purified.

Being convinced of the contrary, I must directly contradict them, and rather draw upon myself their disfavour than neglect an opportunity of rendering a service to my fellow-creatures. But as the spoiled (phlogisticated, foul, fixed, etc.) air can never be restored to purity or turned into vital air by means of these fumes, and as there is not a shadow of a proof that the subtle contagious exhalations, whose essential nature is quite unknown to us and not perceptible to our senses, can be weakened,

neutralized, or in any other manner rendered innocuous by these fumes, it would be foolish, I would almost say unjustifiable, by recommending such fumigations for the supposed purification of the air, to encourage ordinary people in their natural indolence and indisposition to renew the air of their apartments, and thereby expose every indifferent person who comes in contact with them to a danger to his life, which will be all the more obvious and great, the more confident he has been made by the futile representation that, without driving away the disease-spreading miasm by means of repeated draughts of air, the pestilential atmosphere of the sick room has been converted into pure healthy air by means of simple fumigations with vinegar and juniper berries. That is just like the old superstition of hanging an eagle-stone at the hip of the woman in labour, at the very moment when all hopes of saving her, even by the forceps, are over.

When a physician or clergyman enters an unfumigated chamber he can at once tell by his sense of smell whether his needful order to air the room has been obeyed or not. All sick people make a disagreeable smell about them. Therefore the freedom from smell of a chamber is the best proof that it has previously been aired, but if fumigations have been had recourse to, the latter becomes doubtful and suspicious. Neither the physician nor the clergyman, neither the sick-nurse nor the patient, require perfumes when they have to think and speak seriously concerning a matter of life and death. They should never be used!

PLANS FOR ERADICATING A MALIGNANT FEVER

IN A LETTER TO THE MINISTER OF POLICE

Sir,

You will, no doubt, yourself, see the results that the infection that was brought to * * * four weeks ago might produce if its farther spread be not arrested, still I consider it to be a duty, as I have, here and there, had considerable experience in extensive epidemics, to offer my mite at the altar of fatherland, in the form of some unpretending propositions.

Taking into account the malignancy of this fever, if the epidemic be left to itself, it may, in the course of half-a-year, at this season, and in the present condition of the town, sweep away about 250 individuals, a considerable human capital, seeing that it is especially adults, the most useful class, that will first and most certainly be cut off by it. Should it, as soon will happen, once penetrate into the damp dirty houses of the poor, who are already often rendered liable speedily to catch the disease, by unhealthy, miserable fare, by sorrow and depression, it is difficult, very difficult, to extinguish it in these situations. In addition to this, there is the carelessness of the common people, who incline to Turkish fatalism, as the most convenient of all creeds respecting Providence, and their want of reflection in only considering as dangerous what they can see with their eyes, such as a flood or a conflagration. From these

they will flee, but they are indifferent to a murderous pestilential vapour, because it does not fall within the cognizance of their coarse senses. So the ignorant person fearlessly approaches a charged electric battery, and smilingly enters the pit filled with poisonous gases, though his predecessor may just have been brought out of it dead. Every one thinks he possesses enough strength to resist the enemy of life. But vain are his expectations; the giant himself if breathed on by the breath of death sinks down, and the wisest loses his consciousness. Resistance is not to be thought of. In flight, in flight alone, is safety.

The *only* means on which we can rely for checking epidemics in their birth, is the separation of the diseased from the healthy. But if it be left to the public to preserve themselves from infection, every one for himself, even with the help of published advice, experience teaches us that all such recommendations do little good—and often, in spite of the best intentions, cannot be carried out.

But just as the police, when a conflagration breaks out in the town, do not leave it to the caprice of the possessor of the house to extinguish the fire in the way he thinks fit, but themselves make the necessary arrangements, and erect the fire-stations to be employed without delay, if necessary in opposition to the will, and even in spite of the resistance of the owner of the tenement—acting upon the just principle that the security of the community ought to weigh infinitely more than the property of an individual—in like manner, I assert it ought not to be left to the individual's caprice to nurse his relatives affected with infectious disorders, in his house,

since it is not to be presumed that he has either sufficient power, or judgment, or opportunity, to prevent the spread of the disease, and no amount of wealth on his part, no damages expressible in figures, can compensate for the life of one, not to speak of many families, fathers, mothers, husbands, wives, children, endangered by him.

Of a truth if ever the better part of the public ought anxiously to look to the authorities and to the police for protection, it is in the case of the invasion of epidemics, if the protecting divinities of fatherland do not stretch forth their powerful hands on that occasion, where else can we look for deliverance from the danger?

I could easily exhibit a picture of the most frightful scenes, that still haunt me from similar epidemics, whereby the most uncosmopolitan soul must be deeply moved—but to you, sir, such things are not unfamiliar, and you require not such reasons to induce you to put your hand to the work.

Taking for granted, then, that you concede the above premisses, I make bold to make the following preliminary proposals, for whose efficacy experience is my warranty, and thereon I stake my honour.

They may all be set in action in the course of a few days; in this case speed saves expense and human life.

1. Let an hospital or other public building without the gates of the town be prepared, solely for the reception of such patients; the court-yard must be surrounded by a stone or wooden fence, as high as a man.

2. From twenty to thirty cheap bedsteads are

requisite, provided with straw mattresses and frieze coverings.

3. The male and female nurses—of whom there should be one for every four or five patients—must always remain in the house with their patients, and should never go outside the door. The food and medicines they require should be brought to them daily in the open court by persons who should immediately afterwards retire, so that the two parties shall not approach within three paces of each other, and nothing should be brought from the house into the town.

4. In order to enforce this regulation, place a guard of two soldiers before the outer door, which they only are to open, and command them to let none but these persons and the physician and surgeon in and out.

5. A small sentry-box formed of boards will protect them from the weather, outside of which should hang a linen (or, still better, an oil-cloth) cloak for the physician and surgeon, which they should put on when they enter the house and lay aside on leaving it.

6. The medical officers should get a written notice of the mode in which it is desirable that they should protect themselves and others from infection, and the attendants of the sick should get instructions of a similar character.

7. All who fall ill of this malignant nervous fever in the town (the police officers should get a gratuity for all they detect) should be removed to the hospital by their friends in a covered sedan chair, kept for this purpose in the court-yard of the hospital, and there they should be taken care of and cured—(at the expense of their friends?).

Persons so dangerous to the community cease to belong to their friends; from the nature of their malady they come under the surveillance and care of the state, like a highwayman, a madman, a murdering quack-doctor, an incendiary, a robber, a poisoning courtesan, etc. They belong to the state until they are rendered innocuous. *Salus publica periclitatur* is the simple standard for determining all the wholesome regulations of a philanthropic police in such cases. To forbear pulling down neighbouring houses during a spreading conflagration, in consequence of the unreasonable request of their owners, this is a fault that no police now-a-days would commit. In the case we allude to, however, there is no pulling down, but on the contrary, building up. Men's lives, not houses, are to be saved.

Should my patriotic general propositions meet with your approbation, I shall not fail, if no one else does it, to treat of the subject in greater detail, and to furnish, in writing, the additional plans for the general weal, as circumstances prevent me taking a personal share in them.

If I could thereby prevent some misfortune, I should feel myself richly rewarded. But the reason why I, a private individual, occupying no official post, and not intimately connected with this country, wish to lend my aid in this matter, is owing to this, that I think that in such public calamities the motto should be *sauve qui peut!* and hence I am wont to exert myself to the utmost, and to save what can be saved, be it friend or foe.

I am, etc.,

Dr. H.

More Particular Directions

The police officials ought to ascertain where any person has been suddenly taken ill in the town, or has suddenly complained of headache, rigour, stupefaction, or has rapidly become very weak and delirious; they should report what they learn to the appointed physician, who, after a rapid but careful examination, during which he attends to the directions below for avoiding infection, sees that the patient is conveyed to the hospital. At the same time the police officer receives his fixed remuneration.[1]

The large hall of the hospital should be divided longitudinally by means of a partition of boards; the one part so divided to form the patient's ward, whilst the other and much narrower division forms a kind of passage, into which the bedstead of each patient, which should be placed on castors, may be pushed through a trap-door in the partition, in such a manner as that only the patient in the bed shall come into the passage, whereon the trap-door falls-to again. Here the physician examines the external and internal condition of the patient, in the presence of the surgeon, then he causes him to be pushed back into the ward, and the next patient to be brought forward, and so on.

But before performing this examination, and indeed before the arrival of the physician, all the

[1] If this remuneration be considerable (about a thaler [3*s.* 6*d.*] for the discovery of every case of this kind), the progress of the epidemic will be speedily checked, there will soon be no more sick to be separated from the healthy. The sick will be discovered in time, before they can (easily) communicate the infection. Again in human life saved and in the smaller sum required, will be the manifest result.

windows of the passage should be opened in order to air it. Before the patients are brought in they must be closed.

The physician, accompanied by the surgeon, both covered with the oil-cloth cloak,[1] visits the patients twice a day, and questions them at a distance of three paces. If he require to feel their pulse, he must do this with averted head, and immediately afterwards wash his hand in a basin containing water and vinegar. If the patient's face be directed towards the light, it is not difficult to observe the state of the tongue at a distance of three paces. At a less distance it is scarcely possible to avoid the danger of inhaling the patient's breath,[2] whence the contagious principle spreads farthest and most powerfully.

When the patient has a clean tongue,[3] as is found in those who are most dangerously ill, it is often advisable to give him large quantities of bark and wine, in place of any other medicine; and as it is to be apprehended that the nurse might make away with the wine, it is better to prescribe the bark and wine mixed, or for the physician to mix it himself. After every visit the medical officers should wash their hands and faces in vinegar and water.

[1] When the disease is particularly malignant in its character, it is advisable to have a hood attached to the cloak, which the medical officer may draw over his head when he makes his visit, for it has been observed that the contagious matters attach themselves most readily to wool and hair.

[2] The odour of the contagious miasm of malignant typhus fever is a kind of earthy, mouldy smell, like that from old graves newly opened. It has little or no resemblance to the odour of putrid flesh.

[3] This disease was chiefly a gaol-fever without anything in the first passages.

The nurses must also be warned not to hold their faces near the patient's mouth, and after every time they raise up, turn or touch the patient, they should immediately wash their hands and faces. It is advisable to use a mixture of vinegar and water for the purposes of ablution.

Each bed should be provided with a linen mattress well stuffed with straw,[1] over which is spread a linen sheet, and on this a piece of oil-cloth,[2] about three feet in length, whereon the nates and back of the patient lie.

There should be two frieze-coverlets for each bed, in order that the one may hang all day long in the open air, whilst the other is covering the patient. They should be washed once a week by the nurses, together with the rest of the patient's linen, either in the open courtyard, or beneath a shed only covered at top. They should first be washed clean in merely tepid water with soap, and subsequently scalded with boiling water, care being taken to avoid the steam that rises, and they should not be washed a second time until the whole is almost quite cooled down.[3]

[1] Mattresses equally, smoothly, and firmly stuffed with some vegetable substance, as barley-straw, hay or moss, are for this object preferable to feather beds. The former allow the exhalations to pass through, do not retain the miasm so long, and as they are not so yielding form no wrinkles, and are cooler: they prevent the formation of these often fatal bed-sores (*sphacelus a decubitu*) so often met with in malignant fevers.

[2] By its smoothness it prevents the formation of bed sores, and catches the faeces that often pass involuntarily in patients seriously ill. They may be easily removed without soiling the bed linen or mattress, which has a very bad effect on the purity of the air.

[3] A washerwoman in America had to wash some dirty

The oil-cloth should also be frequently wiped with a wet cloth.

Every day at noon all the windows of the sick-room should be opened, and a draught of air kept up for an hour, during which the patients' beds should be pushed through into the ante-room, and remain there all the time.

In the centre of the ward should stand a stove, heated from within.[1]

The most trustworthy of the nurses must be responsible for the accurate carrying-out of these directions, as well as those of the physician.

Those nurses who have already attended patients affected with the complaint are more secure from infection than those who have not. To the former should be assigned the duty of the more immediate attendance on the patients. A new nurse should during the first days only be employed in work at some distance from the patients, such as scrubbing, sweeping, etc., until she is gradually habituated to the miasm.

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clothes, that had been brought over by a ship from England (among them were some that had been worn by a person who had recently recovered from small-pox in London), and she was immediately thereafter infected with malignant small-pox Boerhaave has brought forward abundant proof of the frequency and facility with which washerwomen are infected. He recommended soap not to be used in washing, probably because he thought that the miasmatic matter was more apt to be volatilized by it; but this danger is only to be apprehended from the employment of hot water.

[1] Stoves heated by a fire in their interior, and still more open fire-places, renew the air of the room very effectually as long as the fire burns (and also to a certain extent at other times), because the flame must always have fresh nourishment from the air which it draws through the vent-hole of the stove in large quantity. At the same time pure fresh air penetrates through the chinks of the windows, or through the air-holes above them, into the room.

The state of the health of the whole household should be every day carefully investigated by the physician, even though they consider themselves to be quite well. They should each day be reminded of the directions for their own preservation.

The excrements of the patients should be carried in well-covered night-stools to the most distant part of the court or garden, and there emptied in such a way that the wind shall blow the exhalations from them away from the bearer. This should be done by those of the nurses who are most habituated to the contagious virus (not by the new-comers), upon a thick layer of sawdust, and the ordure immediately covered with one or several bundles of lighted faggots or straw, whereupon the nurse should withdraw, and allow the excrement to be consumed by the fire.

Two of the attendants who have been longest in the service should be appointed the bearers of the sedan-chairs, for the purpose of fetching new patients from the town. For this purpose they should each time put on clean clothes, and apply to the sentry, who will give them from a chest in the sentry-box a clean linen cloak, which they are to put on, leaving their house cloak hanging up on the outside of the sentry-box; they fetch the patient in the chair, and when they have brought him within the inner door (whence he is removed by others into the sick-ward), they take off their clean cloak and return it into the custody of the sentry.

All the attendants, male and female, should wear a linen cloak in the house, reaching down to the feet; this should be washed at least once a fortnight.

The attendants cook the meals for themselves and the convalescents, but they ought to be supplied daily with fresh meat and vegetables; half a pound of the former should be reckoned as the daily allowance of each person. The male attendants should get about three pints of good beer a-piece, the females somewhat less.

They should get double the amount of the daily wages usual in the town. It would be well to promise them additional remuneration in the event of the happy termination of the epidemic. It is inconceivable the power to prevent infection possessed by the beneficent emotions, hope, content, comfort, etc., as also by the strengthening qualities of good living, and of that liquor that is so refreshing to such people, beer!

They should moreover have no lack of wood, soap, vinegar, lights, tobacco, snuff, etc.

If a clergyman is wanted for any of the patients, his visit must be paid in the presence of the physician, and the same formalities must be gone through as when the latter makes his visit, namely, the passage must be well aired before the bed containing the patient is pushed through the trap-door. The physician instructs him how near and in what manner he may approach the patient.[1]

When a patient dies he must be immediately pushed through on his bed into the passage, and left there until the physician has convinced himself of his decease. The corpse is then to be covered with straw, and carried out on his bed into the courtyard or dead-house, where he is to be put, along with the clothes in which he died.

[1] By incautiously approaching the beds of such patients. I have frequently seen the most promising young clergymen infected and die.

into a coffin well stuffed with straw; the corpse should be covered with straw and, in the presence of the physician and clergyman, conveyed to the churchyard in silence. The grave should be four feet in depth, and the coffin should rest upon a layer of faggots, and straw piled up on the top of it up to the level of the top of the grave. After the lapse of three days in this manner, the grave should either be covered with earth, or, still better, the straw ignited and the miasmatic virus consumed along with the corpse, or at least dried till it is rendered innocuous. This is a precautionary measure that cannot be too forcibly recommended.

When a patient recovers so as to be able to be restored to his friends, he should be taken into a clean room, the key of which should be kept by the physician alone, and there put into a bath and well washed over all the body, not excepting the hair, at first with clean warm water, and then sprinkled all over with vinegar before being finally dried. He is then to put on the clean clothes which his friends have sent him; and all his old clothes, without exception, are to be burnt in the courtyard, in the presence of the physician,[1] and finally he is to be accompanied home by the physician and surgeon.

Whenever a patient has recovered or died, the wooden close-stool he has used must be burnt in the open air, and the *pot de chambre* broken and the fragments thrown into the fire.

After the epidemic has been subdued, the male attendants should not be dismissed until they

[1] Too much care cannot be taken to secure the destruction of such things, as the paltry love of gain of the nurses induces them to keep them for themselves, in spite of the danger to themselves and others of doing so.

have whitewashed the whole of the interior walls of the house, not only the sick ward, but every other room, and the females not until they have thoroughly scrubbed all the floors, all the woodwork and all the utensils.

The sick-ward should then be heated in the early morning as much as possible, at least up to 100° Réaum., and after this heat has been kept up for two hours, all the windows should be opened and kept so till night.

Before they quit the house, both male and female attendants should bathe themselves, each sex in separate apartments, and all their articles of clothing and the linen they have used during their residence in the hospital should be placed in an oven of about the temperature of a baker's oven after the bread has been removed (about 120° Réaum.), and kept there for at least a quarter of an hour,[1] the vent-hole being duly regulated the time.

After this is done, all the other linen or woollen articles which have been used by the patients, the straw mattresses (after taking out the straw), the towels, sheets, etc., should also

[1] The pestiferous miasmata which have become attached to clothes, linen, beds, etc., can according to my observations be expelled from such things and *destroyed* by no means more certainly than by a heat of upwards of 100° Réaum., the higher the temperature the better, even should the articles suffer a little from its effects. The celebrated Cook expelled in this manner the morbific vapours that had become attached to the cabins of his ships and infected the walls; the efficacy of this measure is well known. The earliest physicians discovered the wholesome effect of fire and heat in destroying the plague virus, and their excellence is corroborated in our infectious epidemics by Howard, Lind, and Campbell. It is moreover remarkable that all the infection of typhus fever ceases when ships are under the line.

be exposed for fully an hour to the same heat in the oven, and thereafter the bedsteads, after they have been well scoured, should be put in the oven and left there till it cools.

The straw of the mattresses, the accumulated sweepings, rags, bandages, scrubbing clothes, brooms, and other articles of small value, should be burnt in the courtyard in the doctor's presence.

In his presence the attendants should leave the house all together and the sentinels should be withdrawn.

The house may be allowed to stand empty, and reserved for similar purposes on a future occasion, one of the best-deserving male attendants, with his wife, being allowed to live in it gratuitously as housekeepers. Their business would be to see that the building is kept in good repair (in case it is required for another epidemic).

A house of this description and so arranged might subsequently be used with the greatest advantage, with some slight modifications, in epidemics of small-pox, measles, dysentery, and other infectious maladies dangerous to the population, and might be the means of preserving many useful citizens to the state.

There might be a few beds kept there permanently for the reception of all sick journeymen, beggars and trampers from the inns and lodging-houses (a fine being imposed for the concealment of such cases), whereby a source of epidemics of no small importance, but one that is *frequently overlooked*, might be effectually checked at its origin.

This should be the duty imposed upon the housekeeper in return for his free dwelling, but

at the same time he should receive an adequate (not paltry [1]) remuneration for each patient who recovers, when he leaves the house.

[1] If the remuneration be not very small, he and his friends take good care to be ever on the watch for any such patients that may have slipped into the town, and he will do his utmost to obtain it as speedily as possible by the rapid recovery of the patient, to the great advantage of the state (and of the patients).

SUGGESTIONS FOR THE PREVENTION OF EPIDEMICS IN GENERAL, ESPECIALLY IN TOWNS

A WELL-ORDERED police should take care that *rag-gatherers* are not allowed to live anywhere but in isolated houses near the paper-mills,[1] nor should they be permitted to have in any house in the town a place where they may deposit the rags by little and little, only to remove them when they have collected a large quantity. The regulations prevalent in Electoral Saxony should be adopted, viz. that the rag-gatherer should keep in the open street with his barrow or cart, by some signal summon around him those who have rags to sell, and not remain in the town with his collection of rags, but go into the country, and when he puts up at a country inn, leave his cart in the open courtyard, or before the door of the inn; in a word, leave it in the open air. He should be forbidden, under penalty of imprisonment, to pick out from his heap of rags and sell to others for their use any articles of clothing that may be still fit for wear.

They should also be forbidden to wear such articles themselves or put them on their children, which they will often do, to the great detriment of their health, as I have observed. I have seen a malignant epidemic of small-pox spread over the country from so doing.

The *paper-mills* should be so arranged that the supply of the crude rags should be kept in well ventilated buildings far away from the

[1] Which should never be built close to towns and villages.

dwelling houses, and the reception of the rags from the gatherer, and the weighing of them, in order to determine the sum he is to receive, should be carried on in a covered shed, open on all sides.

The *dealers in old clothes* should only be allowed to carry on their trade in open shops, and should not be permitted to sell them in their houses under penalty of imprisonment. All the linen and articles of clothing they have for sale in their shops should be previously washed, not excepting even the coloured and woollen articles; and a police officer should be charged to examine if they be washed, who should overhaul the whole contents of the shop on undetermined days. Every article that he finds still dirty should become his property after having shown it to the inspector of police in the presence of the dealer.[1]

It should only be permitted to the burghers of the town to deal in old clothes. Jews engaging in this trade should be deprived of their letters of protection. Women found carrying it on should be put in the House of Correction.

The civic-crown merited by him who improves the *prisons* has been gained from us Germans by an Englishman—Howard. Wagnitz follows in his steps. It is inconceivable how often the most destructive vapours are concentrated in these dens of misery, fraught with death to those that enter them; how often their visitors are pre-

[1] Should it be feared that such an article of clothing, probably worn by a sick person, might prove dangerous to the policeman, it should be considered that the poor broker, in order to avoid such a loss, will most certainly take care to have none but clean washed things in his shop, and thus the police agent will have little or nothing to confiscate.

maturely sent to the grave by fatal typhus. Destructive epidemic diseases often have their origin in these death-laden walls.

There are several kinds of prisons. I shall here allude only to those where the imprisonment is for life and to those gaols where prisoners guilty of capital crimes are kept until the termination of their trial (often for several years), the visitation or inspection of which is not unfrequently the cause of infectious diseases. Even when the prisoners themselves have not been ill of such fevers, their exhalations, their breath, and the miasm lurking about their dirty clothes, have often occasioned malignant fatal fevers. Heysham, Pringle, Zimmermann, Sarcone and Lettsom adduce a number of cases of this kind.

Now as in the true spirit of laws that are free from all barbarity, even the punishment of death should have (and can have) no other aim than to render an incorrigible criminal innocuous, and to remove him from human society, what else can both these kinds of imprisonment be except rendering the prisoner harmless, in the former case for life, in the latter for a certain time pending the duration of the trial. None but Syracusan tyrants could dream of uniting a more inhuman intention with such prisons.

If then the gaol even for capital offenders can and ought to be nothing but a means of depriving them of all opportunity of injuring society, in that case every torture that is unnecessarily inflicted on them when thus in custody *is a crime on the part of the police*. I only allude here to the pain inflicted on them by unhealthy (disease-producing) prisons. In order to avoid this, prisons should never be raised less than four feet above the ground, and the openings of the

windows, while they are sufficiently narrow, should be always so long as to allow the free access of fresh air. Where two windows opposite each other cannot be obtained (which is the best plan), there ought to be at least three windows for each small cell. The floor should either be paved with slabs of stone or, better, with rounded stones, so that it may be deluged and scrubbed, once a week, with boiling water. The walls and roofs should be lined with wooden boards, like the peasants' houses, in order to allow of their being also washed with hot water,[1] as is customary with the country people. By these means these dismal habitations are at all events rendered dry residences, and the cachexias and tumours so frequently met with in such as have undergone a long imprisonment are in a great measure prevented. If it were possible to construct an air-hole for the purpose of carrying off the deteriorated vapours into the open air, gaols would thereby lose much of their dangerous aptitude to generate pests. The prisoner should have at least once a week a bundle of fresh straw for his bed. His bed-cover, together with his clothes and linen, should be washed at least once a week in hot water. He himself should be forced, before putting on his clean clothes, to wash his body all over. His chamber utensil should be emptied daily, and rinsed out with boiling water. He should be

[1] The exhalation from these wretched creatures, that constantly tends to decomposition, and the animal poison developed from their breath, whereby the air of their narrow cells is deteriorated, attaches itself in great quantity to the walls of gaols, and in course of time degenerates into a pestilential miasm; by the process above described it is removed and washed away by the boiling water.

allowed to walk about in the open air at least once a week, for at least an hour at a time.

When he is removed from prison, his cell must be prepared for the reception of future prisoners by washing anew the floor, the walls and the roof with hot water, and by placing a small stove in it, the funnel of which goes out at the window. With this the cell is to be heated very highly, so that the heat shall almost take away one's breath (up to 120° Réaum.), and then the stove should be again removed, supposing it is not allowed to have one in the cell.

If not, an iron tube communicating with the open air should open in the floor of the cell, passing in winter through a heated stove, in order to conduct in a supply of fresh warm air.

It is great cruelty to shut up many prisoners together without allowing at least 500 cubic feet of space and air for each. If this be not allowed, the better ones among the prisoners are exposed to much annoyance by the bad behaviour of the worse ones; and it is incredible the rapidity with which that most destructive of all animal poisons, the virus of the most fatal pestilence, is generated. Police authorities, be humane!

I scarcely need to remark, that the (often long-continued) imprisonment of debtors who are frequently deserving of compassion, ought to be made at least as innocuous for the health of the prisoners, of the turnkeys, and of those who visit them, etc., as that of criminals.

When *foreign prisoners* or *field-hospitals* are introduced into a healthy country in time of war, whether temporarily or permanently, the authorities, if they have it in their power to act, should take care that an epidemic is not thereby brought into the country.

Prisoners of war, who are not unfrequently suffering from typhus and putrid fevers, in their transit through a country, are generally, when remaining for the night in towns, lodged in the town-halls, apparently in order that they may be kept more securely. But how often has this practice given rise to the spread of epidemics!

It would be safer to quarter them in large coach-houses, stables, barns, etc., outside the town, to make them lie undressed on straw mattresses, keeping them warmly covered in winter, and in this manner retaining them until their march can be renewed.[1] If the season of the year admit of it, they must be compelled to wash each other's clothes and linen with hot water, and to dry them in the open air.

The most destructive pestilences are most easily engendered by *military hospitals*. It would be the most disgraceful barbarity, even in an enemy, to erect them in the middle of towns.

But if, nevertheless, this is done, there remain for the poor townsman, if they bring pestilence along with them, as they usually do, very few means of preserving the life and health of himself and family, and these he should carefully attend to.

If he will not or cannot leave the town, he must at all events avoid all intercourse and communication with the sick, with infected houses, and even with those who frequent such houses. If they bring him anything he should take it from them at his house-door or in the open court. Should it be articles of clothing or linen, he should not make use of them before he has

[1] On the march they have plenty of air and exercise: in this way they get rest and warmth, and are incapacitated from making their escape.

plunged them into hot water mingled with vinegar, in the open court, or thoroughly fumigated them with sulphur. Should it be articles of food,[1] let him not partake of them before preparing them on the fire, or otherwise heating them.

Infectious diseases have even been communicated by money and letters; the former may be washed in boiling water, the latter fumigated with sulphur.

Although the animal poisons called infectious miasmata are not infectious at the distance of several paces in still open air, so that we may (with the exercise of great care) preserve our house free from infection in the midst of houses where the malady is raging, we should remember that a draught of air can carry the miasm arising from a sick person to a distance of many paces, and then occasion infection.

On that account we should avoid traversing narrow lanes where we should have to pass close by a sick person, and for a similar reason we should shun narrow passages through houses. Above all we should refrain from looking into an open window and conversing with people in whose house or room cases of infectious disease may exist.

Acquaintances kiss each other or shake hands;

[1] A person who is exposed to the danger of infection, should not allow his courage to sink, should not leave off any of his accustomed comforts, rest, exercise, food, or drink; but he should also carefully avoid all excess in any of these things, as also in passions, venereal excitement, etc. The other prophylactic measures that should be adopted will be found in the first part of the "Friend of Health." A slight increase of stimulants, such as wine, tobacco and snuff, is said to be a powerful prophylactic against infectious disorders.

this ceremony should be omitted when the danger is so imminent; as also drinking out of another's glass.

At such times we should never bring second-hand furniture [1] into our premises.

Domestic animals that are given to rove, such as dogs and cats, often carry about with them in their hair the virus of infectious diseases. For security's sake it is advisable to get rid of them at such times, and not to allow strange dogs or cats to approach us.

The drying up of *marshes* and *old ditches* close to human dwellings has frequently been the occasion of the most murderous pestilences.[2]

If the fosse surrounding the town is to be cleared out or dried up, as is highly desirable for the health of the inhabitants of all towns, this work should only be undertaken in the depth of winter. The water should be carried off in the form of ice-layers, and the ice that forms again in a few nights should next be taken away, and so on till no more water remains.

[1] I have seen putrid fevers occur periodically for many years in the country, merely by old furniture, which had belonged to persons who had died of such affections, coming into other families by purchase.

[2] I saw the fortieth part of the inhabitants of a large town die of typhus, in consequence of the incautious draining of the town fosse.

Whenever the slime of such a town fosse, which may have been accumulating for many, perhaps hundreds of years, is deprived of the fresh water covering it, the half putrefied animal matters contained in it immediately pass into the last stage of decomposition. This last stage of decomposition of animal substances is infinitely more poisonous than all the previous ones, as we may see in the rapid fatality of the exhalations from cesspools which have not been cleared out for thirty years or more. Of this more hereafter.

But as the removal of the mud from town-ditches is much preferable to letting it gradually dry up, seeing that throughout the whole time required for the latter, noxious vapours are constantly exhaling, there is no better time for removing it than in severe cold. The mud which is in a state of putrefaction is always warm, and never freezes so much as to prevent its being easily dug out in winter. We can also more readily dispense with draught-cattle on account of the excellent condition of the roads in severe frosty weather.

After great *inundations* on flat land, the spontaneous drying up of which cannot be expected to take place in a short time, it is requisite that all should lend a hand to cut ditches through and round about the inundated country; but if it is impossible to drain off the water into the river on account of its low level, a number of small windmills must be erected in order to pump off the water as quickly as possible and dry the land; for if this be not done the water readily takes on the putrefactive process, giving rise from spring to autumn to dysenteries and putrid fevers.

The *low-lying houses that have been inundated* by the water are a fertile source of epidemic diseases (see Klöckhoff). The police authorities must see that every householder digs a deep ditch round his premises, and especially round his dwelling-house; that he has all his windows and doors open for the greater part of the day; that he occasionally lights fires even in summer; and that in winter, at all events before he rises in the morning, all the doors and windows are left open for an hour at a time.

There are places that are destitute of the (often

unacknowledged) benefit of a sufficient supply of *fresh* flowing *water*, in place of which the inhabitants are obliged to make use of spring- or rain-water brought from a distance, or to put up with rain-water only. In all such cases they collect their supply of water for a long time in large reservoirs, in which it becomes stale in a few days and furnishes a very unwholesome drink, the source of many diseases. Soon, it again becomes clear and inodorous; but in a short time the putrefaction recommences, and so it goes on until the water is all consumed, the greater part of it in a very bad state. I shall not here attempt to determine whether these disadvantages might not be obviated by the construction of artificial aqueducts on no very expensive scale, or of (very deep) wells; but I am convinced that in flat localities on firm soil it is possible to resort to one or other of these plans, whatever may be alleged against it by the paltry parsimony of many corporations, who look on unmoved whilst many such communities gradually die out. In the absence of such a radical cure, I would advise every householder to keep his supply of water in casks, in which for every 400 pounds of water one pound of powdered wood charcoal should be thrown, which, according to the discovery of Lowitz, possesses the power of preserving water from putrefaction and of making stale water sweet. The clear fluid may be drawn off when required through a tap provided with a tight linen bag.

A similar precaution against the production of disease is adopted in large *ships* that go to sea, which are often reduced to great straits on account of a deficient supply of fresh water. But many causes conspire in ships to produce de-

structive [1] diseases. Among these are the mode of feeding the crew so much in vogue, with often half-decayed, dried, and salted meat, with unwholesome fatty substances of various kinds; the want of fresh air when during continued storms they have to pass many days together below deck with the port-holes closed, when the exhalations from their bodies increase to a pestilential fœtor; the exhaustion of the sailors when kept at work too long, during which their wet clothes check the perspiration. These causes engender and keep up scurvy, dysentery, and other maladies.

The risk of such disorders may be avoided by the following measures: supplying vegetable food, and in the absence of green herbs, dried legumes that so easily ferment; sauerkraut; sometimes brown sugar in place of oil; brandy for strengthening; meat-soups boiled down and dried, in place of kept meat; malt-liquor to drink in addition to water; the division of labour into eight hours' work; care that the crew have always dry clothes to put on, and that their habits are cleanly; frequent pumping out of the necessary; and the purification of the air between decks by means of large braziers of burning charcoal according to Cook's method. The frequent washing with sea-water of the various utensils, the floor, the walls and the decks, must not be neglected. If powdered charcoal be mingled with the sea-water used in scrubbing, the stench of the walls will be effectually got rid of. In

[1] Major Nante observed during the war betwixt England and North America a pestilential gaol-fever break out on board the fleet lying off the Havana, of such severity that numbers of men who seemed to be in perfect health died after an illness of not more than from three to four hours.

addition to all this care should be taken not to take on board sick persons, or such as have scarcely recovered from illness; and all the utensils and furniture should be frequently exposed to the air on deck when the weather is good.

By the employment of Sutton's method of conducting leaden pipes into all parts of the ship which all terminate in the kitchen fireplace, the deteriorated air will most certainly be drawn off by the fire. But Cook's braziers do much more, for they heat the walls, and thus destroy the contagious matter much more effectually. Hale's ventilators (a kind of wooden bellows) are little used in ships. Would not the so-called garden-cress (*lepidium sativum*) be a valuable vegetable, or at all events be useful on board ship as a medicine, in order to diminish the noxious matters in the first passages? The facility with which its seed grows is well known. We only need to strew it upon a piece of old wet sailcloth, and cover it with unravelled pieces of old moistened tow.

In towns where no rapid stream of water can be conducted through even the small streets wherein the animal excrements, the washing-water, the urine and other impurities of men and animals can be carried off without doing any harm, covered *cesspools* cannot be dispensed with.

These cesspools are always a bad thing for the health of man, from their aptitude to engender, or at least to promote, pestilence.

In order to render them as innocuous as possible, they should be built up with masonry, not only on the roof and walls, but they should also be paved on the floor with stones cemented to-

gether, in order that the putrefying impurities may not sink into the ground, but be capable of being taken clean away. They must be frequently cleansed out, and the odour removed quickly.

The time selected for cleansing them should be during the prevalence of a strong wind, more especially one from the north, north-east, east or south-east, and those days should be avoided when a long period of warm rain, calm and foggy weather, with a low state of the barometer prevails.

Though we are not able to adduce any instances in which the exhalations from *old privies* have spread a pestilence of any duration, yet no good police which attends to the health of the community should permit them; and moreover, cases have occurred where workmen suffocated in such places have spread such a virulent exhalation from their clothes, that many of those approaching them have been cut off by typhus fever.

In order to avoid the pestilential poison proceeding from animal substances in the last stage of putrefaction, the most destructive of all poisons, the removal of such murderous pits should be advised, and no sensible person will object to this.

But when they are already in existence and require to be cleared out, we must not go to work incautiously. The simplest method of freeing such pits from their poisonous exhalations is always the lowering into them of small loose bundles of ignited straw attached to a wire, since there is rarely in them any inflammable gas that might endanger the house by its ignition. These bundles are to be let down to the depth at which

they will almost be extinguished by the vapour, and then they should be allowed to burn out. This process is to be repeated with larger and larger ignited bundles until the stratum of gas is removed to the very floor of the pit, and atmospheric air occupies the place of the fire-extinguishing gas. But our precautionary measures should not cease here: for it is not only want of atmospheric air that kills the workmen in such situations, but still more the vapour that rises, though not to any great height in consequence of its weight, from stirring up the human excrement that has entered on the last stage of putrefaction. In order to render this as harmless as possible, a quantity of dry faggots ignited should be thrown into the pit, sufficient to cover all the bottom of it, and there they should be left till they are totally consumed. The heat thus generated will, after the lapse of an hour, have rendered the odour innocuous to at least a foot in depth. This quantity should then be removed by the workmen; faggots are then to be burnt as before on what is beneath, whereupon the next layer is removed, and so on until it is all cleared away.

Should it really prove true that the most of our police authorities have abolished burials in churches, we should not be thereby set quite at our ease. The *old* graves still exist in our churches, in which the last and most poisonous stage of decomposition of the dead bodies has not yet ceased to emit its destructive emanations.[1] Hence alterations and building opera-

[1] It should be borne in mind that the most fatal gas generated by the last stage of putrefaction does not readily rise, but is heavy, and not unfrequently reposes in a low stratum above the corrupting matter, until it is stirred up, and is thus rendered dangerous to life.

tions in the floor of such churches are fraught with manifest danger to the life of the workmen and the congregations in the churches, whence diseases may spread over a considerable portion of the population.

In June 1773 a grave was opened in the church of Saulieu in Burgundy, and church-service performed soon afterwards, in consequence of which, 40 children and 200 grown-up people, together with the clergyman and sexton, were assailed by the exhalation that arose, and carried off by a malignant disorder. Moreover it has not yet been perfectly ascertained how many years the contagious principle may remain attached in undiminished virulence to the buried corpses of those who have died of malignant diseases.

In many countries the *lying in state of all bodies* is very properly forbidden. But in others where not so much enlightenment prevails, infectious diseases are often propagated by the exposure of such poisonous bodies, of which I could adduce many examples from Saxony.

In 1780 a girl brought a putrid fever with her to Quenstädt from Aschersleben. All her numerous brothers and sisters and her parents took ill of it, one after the other, but they all gradually recovered except one grown-up daughter, who died of bed-sores. I took the greatest pains to prevent the disease being propagated to others from this house. I succeeded in this for five months, until this girl died and had to be buried. The young men of the village bore the body in a coffin nailed up according to my directions, to the grave. Here, from their attachment to the deceased, they disobeyed the strict orders given by my friend, the clergyman;.

they forced open the lid of the coffin in order to see the corpse once more before it was let down into the grave. Others, moved by curiosity, approached. The third and fourth day thereafter all those that had been guilty of this action, lay mortally sick of this fever, as also all those who had come near the grave (some of them from neighbouring villages), to the number of eighteen, of whom only a few escaped death. The epidemic of putrid fever spread around at the same time.

Is it not desirable that those important personages in the state called *inspectors of the dead* and *corpse-washers,* whose business it originally was to form a silent judgment respecting the kind of death that had occurred and to verify the decease, should receive from the juridical medical officer accurate instructions on this by-no-means easy point, before undertaking such an important—such an exceedingly important—duty? How many lives of those apparently dead might they not be instrumental in restoring, how many cases of murder might they not detect; and, what interests us peculiarly in this place, how often might they not discover that some who have died without having been seen by any physician, might have laboured under contagious diseases!

We should not be too rash with bodies brought to the *dissecting-rooms,* nor receive such as we may suspect to have died of contagious diseases, nor keep the subjects until they are in the last stage of putrefaction, nor, for the sake of bravado, have too much to do with macerated parts in a state of extreme decomposition, and often melting away under our touch, which can no longer teach us anything. Examples are not

wanting of the students who were merely looking on being rendered dangerously ill thereby.

But chiefly are the contagious pestilences in towns harboured, renewed, promoted and rendered more contagious and more murderous, in the small low *old houses* situated close to the town-walls, huddled together in narrow *damp lanes,* or otherwise deprived of the access of fresh air, where poverty dwells, the mother of dirt, hunger, and despondency. In order to save firing and the expensive rent, several miserable families are often packed close together, often all in one room, and they avoid opening a window or door to admit fresh air, because the cold would enter along with it. He alone whose business takes him into these abodes of misery can know how the animal matters of the exhalations and of the breath are there concentrated, stagnant and putrefying; how the lungs of one are struggling to snatch from those of another the small quantity of vital air in the place, in order to render it back laden with the effete matters of the blood; how the dim, melancholy light from their small darkened windows is conjoined with the relaxing humidity and the mouldy stench of old rags and decayed straw; and how grief, envy, quarrelsomeness and other passions strive to rob the inmates completely of their little bit of health. In such places it is where infectious pestilences not only smoulder on easily and almost constantly when a spark falls upon them, but where they take their rise, burst forth and even become fatal to the wealthy citizens.

It is the province of the authorities and the fathers of the country to change these birthplaces of pestilence into healthy, happy human dwellings. Nothing is left for me but to turn

my face away from them and to keep my compassion to myself.

If, however, the inmates of them be not without employment, their systems, accustomed to meagre fare and hard work, resist infections tolerably well; but when they are out of work, when *dearness* of the first necessaries of life and *famine* prevail among them, then, from these dirty sources of misery and woe, diseases of malignant character and pestilences perpetually issue. It is only since the fearful years 1771, 1772, and 1773 that some rulers have learned, from the dangers to which they themselves were exposed, to provide for the safety of their many thousand subjects by establishing corn-granaries and flour-magazines against seasons of scarcity.

I must make the general observation belonging to this place, that most of our towns are not adapted, nor calculated, to promote health. High town-walls and ramparts are now generally acknowledged to be useless for towns that are not fortified. That they are injurious by preventing the access of fresh air will also be readily conceded. But that the masses of houses of most towns are too closely huddled together is not yet generally seen, and when it is, it is attempted, but without success, to be excused, by the greater facilities offered for business and trade by having everything within a small circle.

In towns about to be built it should not be allowed to build houses higher than two stories, every street should be at least twenty paces in width and built quite straight, in order that the air may permeate it unimpeded; and behind every house (the corner houses perhaps excepted), there should be a courtyard and a garden as broad and twice as long as the house. In this

way the air may be readily renovated: behind the houses in the considerable space formed by the adjoining gardens, and in front in the broad straight streets. This arrangement would be so effectual for suppressing infectious diseases and for preserving the general health,[1] that if it were adopted most of the precautionary measures against pestilence I have inculcated above would be rendered to a great degree superfluous. What advantages in this respect do not Neuwied, Dessau, etc., possess!

The handsome, roomy high and airy *butchers' shops* we meet with in some towns (*e. g.* Dresden) are not so good as the open butchers' stalls standing in market places and only covered by a roof. A putrid stench is always concentrated in the shops built for the sale of meat.

The shops for the sale of stock-fish and herrings should be situated in the open air, at the outside of the city-gates; the disgusting stench that proceeds from them is sufficient evidence of their unwholesomeness.

Were it possible to banish entirely from the interior of towns all the manufactories and warehouses of the butchers, soap-boilers, parchment-makers, catgut spinners, glue-boilers, and all other trades that are engaged with animal sub-

[1] The deteriorated air in closely built towns with high houses is especially injurious to children, and gives rise to those deformities of the beautiful human figure denominated rachitis, which consists of a softening of the bones, combined with laxness of the muscles, inactivity of the lymphatic system, and a high degree of irritability. The non-medical observer does not readily notice the large number of these pitiable little monstrosities in closely built towns, partly because a great many of them sink into the grave in the first years of their life, partly because the cripples who escape conceal themselves for shame from the public gaze.

stances that become readily decomposed, and to transfer them to special buildings outside the town-gates, this would be a great advantage as regards infectious diseases. I have seen many butchers' houses in narrow lanes completely cleared of their inmates in epidemics, whilst the houses in the neighbourhood suffered much less severely.

It is astonishing how the indolence of that class of men who cherish their prejudices inspires them with such deep respect for some things that appear horrible to them, so that there is with them but little difference[1] betwixt them and things that are holy. It can only be attributable to this unaccountable prejudice that the *bodies of dead domestic animals*, as also those persons who have to do with them, have been considered as not to be meddled with and as exempt from the regulations of a good police. Owing to this, great confusion and injuries to the health of the community have resulted. In this place I shall only complain of the custom of leaving the bodies of dead domestic animals in the open air, on greens and commons not far removed from the dwellings of man, a custom so opposed to all ideas of the preservation of health.[2] If, as

[1] It is curious that in almost all languages the same expressions are applied to the most horrible as well as to the most revered things—*schaudervoll*, *sacer*, *awful*, are instances in point.

[2] Does this custom originate in the vanity of man, who thinks to vindicate his right to the title of sole lord of creation by assuming to be alone worthy of the high honour of being buried beneath the ground, and to show his supreme contempt for animals (even of such as are most useful and most valuable to us), gives them the vilest names and leaves them unburied in the open air, in defiance of Nature which seeks to conceal all putrefying processes from the public gaze?

is assuredly the case, all putrefying animal substances make a horrible impression on our senses; if, moreover, all contagious diseases are hatched in corruption; how can we imagine that such large masses of putrefying flesh of horses and horned cattle, particularly during periods of great mortality among cattle, can be a matter of indifference as far as human health is concerned. The thing speaks for itself!

It is in large well-regulated towns only that I have met with some (although seldom sufficient) attention directed to the *sale of spoilt food*, especially animal food. In districts where fish abound, many kinds, especially smaller ones, are brought to market with all the signs of putrefaction upon them. They are chiefly purchased by poor people, because they are cheap —nobody gives himself any concern about the matter, and the labourer when he is taken ill throws the blame of his sickness on any cause but the right one. Nobody concerns himself; the seller of this pernicious food returns home after having pursued his avocation unimpeded. The authorities who may perchance hear of it, say to themselves: Where there is no complaint, there is no judge. Can such be called Fathers of the town?

Other kinds of spoilt food can also produce infectious typhus fever.

In large *manufactories* and *work houses* where the workpeople live in the house, those who fall ill should, whenever they commence to complain, be immediately separated from the healthy workmen, and kept apart until they have completely recovered their health. And even where the workmen reside out of the house but come to work together in large workrooms, it is the duty

of the master manufacturer, especially at the time of the prevalence of epidemics, to send home immediately such of the workmen as begin to complain of illness. Great care should be taken always, but especially when disease is about, to have the workrooms and warerooms well aired and clean.

Public schools are generally places for the diffusion of contagious diseases, such as small-pox, measles, scarlet fever, malignant sore-throat, miliary fever (whooping-cough ?), and many skin diseases. If schoolmasters in general were given to attend more to the physical and moral training of their pupils than to cramming their memories, much mischief of this character might be prevented. It should be impressed upon them not to admit any sick child to the classes, whose altered appearance betrays the commencement of a disease. Besides, a sick child can learn nothing.

In times of prevailing sickness the clergymen should publicly warn the members of their congregations, not to come to church when they are feeling indisposed, and thereby expose their neighbours to danger.

I cannot here enter into details regarding the power of bad arrangements in *poor-houses*, *houses of correction*, *orphan asylums* and *invalid hospitals*, as also of *ordinary hospitals* and *infirmaries*, in producing and promoting infectious diseases; and still less can I describe the best plans for such institutions designed for the relief of the most miserable classes of society. The subject is too important, and in many respects much too vast to be dismissed here with a few words.

ÆSCULAPIUS IN THE BALANCE[1]

Ars autem tam conjecturalis cum sit (praesertim quo nunc habetur modo) locum ampliorum dedit non solum errori verum etiam imposturae.—BACO DE VERULAM, *Augm. Scient.*

AFTER I had discovered the weakness and errors of my teachers and books, I sank into a state of sorrowful indignation, which had nearly altogether disgusted me with the study of medicine. I was on the point of concluding that the whole art was vain and incapable of improvement. I gave myself up to solitary reflection, and resolved not to terminate my train of thought until I had arrived at a definite conclusion on the subject.

Inhabitants of earth, I thought, how short is the span of your life here below! with how many difficulties have you to contend at every step, in order to maintain a bare existence, if you would avoid the bypaths that lead astray from morality. And yet what avail all your dear-bought, dear-wrung joys, if you do not possess health?

And yet how often is this disturbed—how numerous are the lesser and greater degrees of ill-health—how innumerably great the multitude of diseases, weaknesses and pains, which bow man down as he climbs with pain and toil towards his aim, and which terrify and endanger his existence, even when he is supported by the rewards incident to fame, or reposes in the lap of luxury. And yet, oh man! how lofty is thy descent! how great and God-like thy destiny!

[1] Published at Leipzic in 1805.

how noble the object of thy life! Art thou not destined to approach by the ladder of hallowed impressions, ennobling deeds, and all-penetrating knowledge, even towards the Great Spirit whom all the inhabitants of the universe worship? Can that Divine Spirit who gave thee thy soul, and winged thee for such high enterprises, have designed that thou shouldst be *helplessly* and *irremediably* oppressed by those bodily ailments which we call diseases?

Ah, no! The Author of all good, when He allowed diseases to injure His offspring, must have laid down a means by which those torments might be lessened or removed. Let us trace the impressions of this, the noblest of all arts, which has been devoted to the use of perishing mortals. This art must be possible—this art which can make so many happy; it must not only be possible, but already exist. Every now and then a man is rescued, as by miracle, from some fatal disease! Do we not find recorded in the writings of physicians of all ages, cures in which the disturbance of the health was so great that no other termination than a miserable death seemed possible? Yet such cases have been rapidly and effectually cured, and perfect health restored.

But how seldom have these brilliant cures been effected when they were not rather ascribable, either to the force of youth overmastering the disease, or to the unreckoned influence of various fortunate circumstances, than to the medicines employed! But even were the number of such perfect cures greater than I observe them to be, does it follow from that that we can imitate them with similarly happy results? They stand isolated in the history of the human race, and they can but very seldom, if at all, be reproduced

as they were at first occasioned. All we see is, that great cures are possible; but *how* they are to be effected, what the power, and the particular circumstances by which they were accomplished, and how these are to be controlled so that we may transfer them to other cases, is quite beyond our ken. *Perhaps the art of healing does not consist in such transferences.* This much is certain: an art of medicine exists, but not in our heads, nor in our systems.

"But," it is urged in reply, "are not people cured every day in the hands of thoughtful physicians, even of very ordinary doctors, nay, even of most egregious blockheads?"

Certainly they are; but mark what happens. The majority of cases, for the treatment of which a physician is called in, are of acute diseases, that is, aberrations from health which have only a short course to run before they terminate either in recovery or death. If the patient die, the physician follows his remains modestly to the grave; if he recover, then must his natural strength have been sufficient to overcome both the force of the disease and the usually obstructing action of the drugs he took; and the powers of Nature often suffice to overcome both.

In epidemic dysentery, just as many of those who follow the indications afforded by Nature, without taking any medicine at all, recover, as of those who are treated according to the method of Brown, of Stoll, of C. L. Hoffmann, of Richter, of Vogler, or by any other system. Many die, too, both of those treated by all these methods, and of those who took no medicine; on an average just as many of the one as of the other. And yet all the physicians and quacks who attended those who recovered boasted of

having effected a cure by their skill. What is the inference? Certainly not that they were all right in their mode of treatment; but perhaps that they were all equally wrong. What presumption for each to claim, as he did, the credit of curing a disease, which in the milder cases uniformly recovered of itself, if gross errors in diet were not committed!

It were easy to run through a catalogue of similar acute diseases, and show that the restoration of persons who in the same disease were treated on wholly opposite principles could not be called cure, but a spontaneous recovery.

Until you can say, during the prevalence of an epidemic dysentery for example, "Fix upon those patients whom you and other experienced persons consider to be most dangerously ill, and these I will cure, and cure rapidly and without bad consequences." Until you can say this, and can do it, you ought not to vaunt that you can cure the dysentery. Your cures are nothing but spontaneous recoveries.

Often—the thought is saddening!—patients recover as by a miracle when the multitude of anxiously changed and often repeated nauseous drugs prescribed by the physician is suddenly left off or clandestinely discontinued. For fear of giving offence, the patients frequently conceal what they have done, and appear before the public as if they had been cured by the physician. In numerous instances, many a prostrate patient has effected a miraculous cure upon himself not only by refusing the physician's medicine, but by secretly transgressing his artificial and often mischievous system of diet, in obedience to his own caprice, which is in this instance an imperious instinct impelling him to commit all

sorts of dietetic paradoxes. Pork, sauerkraut, potato-salad, herring, oysters, eggs, pastry, brandy, wine, punch, coffee, and other things most strongly prohibited by the physician, have effected the most rapid cure of disease in patients, who, to all appearance, would have hastened to their grave had they submitted to the system of diet prescribed by the schools.

Of such a kind are the apparent cures of acute diseases. For those beneficial and useful regulations for the arrest of pestilential epidemics, by cutting off communication with the affected district, by separation and removal of the sick from the healthy; by fumigation of the affected abodes and furniture with nitric and muriatic acid, etc., are wise police regulations, but are not medicinal cures.

In the infected spots themselves, where a further separation of the infected from the healthy is not to be thought of, there the nullity of medicine is exhibited. There die all, if one may be allowed the expression, who can die, without being influenced by Galen, Boerhaave, or Brown, and those only who are not ripe for death recover. Nurses, physicians, apothecaries, and surgeons, are all alike borne to their grave.

At the same time it is undeniable, that even in such calamities, so humiliating to the pride of our art, occasional, but rare cures occur, effected obviously by medicine, of so striking a character, that one is astonished at so daring a rescue from the very jaws of death; these are the hints afforded by the Author of Life "THAT THERE IS A HEALING ART."

But how did it act here? What medicine did the real good? What were the minute particulars of the disease, in order that we may imitate

the procedure when such a case recurs? Alas! these particulars are and must remain unknown; the case was either not particularly observed or not reported with sufficient exactness. And the medicine? No; a single medicine was not given; it was, as all learned recipes must be, an elixir, a powder, a mixture, etc., each composed of a number of different medicinal substances. Heaven knows which of them all did good.[1] "The patient also drank an infusion of a variety of herbs; the composition of this I do not recollect, nor does the patient remember the precise quantity he took."

How can any one imitate such an experiment in an apparently similar case, since neither the remedy nor the case are accurately known? Hence all the results attempted by future imitators are deceptive; the whole fact is lost for posterity. All we see is, *that* cure is possible; but *how* it is to be effected, and how an indefinite case can tend to perfect the art of medicine, that we do not see.

"But," I hear exclaimed, "you must not be too severe upon physicians, who are but men,

[1] Let it not be asserted "that all the substances only did good because of their combination, that naught must be added to, nothing taken from, it to enable us to repeat the fact." Many ingredients are never of equal goodness and power in any two chemists' shops, not even in the same shop at different times. Even the same mixture will be different in the same shop to-morrow from what it was to-day, according as one ingredient was added sooner than the other, more fully pulverized, or rubbed-up more strongly with the other ingredients, according as the atmospheric temperature was lower to-day, to-morrow higher, the ingredients more accurately measured to-day than to-morrow, or according as the preparer of the prescription was more attentive to-day, less to-morrow; and many other circumstances may occur to mar human calculations.

amid the hurry and bustle which infectious diseases in circumscribed spots bring with them."

"In chronic diseases he will come off more triumphant; in these he has time and cool blood at his service in order to exhibit openly the truth of his art, and in despite of Molière, Patin, Agrippa, Valesius, Cardanus, Rousseau and Arcesilas, he will show that he can heal not only those who would get well of themselves, but that he can cure what he will and what he is asked to cure." Would to Heaven it were so! But as a proof that physicians feel themselves very weak in chronic diseases, they avoid the treatment of them as much as possible. Let a physician be called to an elderly man, paralysed for some years, and let him be asked to exhibit his skill. Naturally he does not openly avow how impotent this art is in his hands, but he betakes himself to some byway of escape—shrugs his shoulders—observes that the patient's strength is not sufficient to enable him to undergo the treatment (in general a very exhausting, debilitating procedure in the hands of ordinary practitioners), speaks with a compassionate air of the unfavourable season and inclement weather, which must first be over, and of the healing herbs of spring, which must be waited for before the cure can be attempted, or of some far-distant mineral waters where such cures have been made, and whither, if his life be spared, the patient will be able to proceed in the course of six or eight months. In the meantime, not to expose himself, he orders something, of the effects of which he is not at all sure; this he does in order to amuse the patient and to make a little money out of him at the same time; but certain relief he cannot give. At one time he wishes to remove the

asthenia by internal or external stimulants; at another fortify the tone of the muscular fibre with a multitude of bitter extracts,[1] whose effects he knows not, or strengthen the digestive apparatus with cinchona bark; or he seeks to purify and cool the blood by a decoction of equally unknown plants, or by means of saline, metallic and vegetable substances of problematic utility, to resolve and dissipate suspected but never observed obstructions in the glands and minute vessels of the abdomen; or by means of purgatives he thinks to expel certain impurities which exist only in his imagination, and thereby hasten *by a few hours* the sluggish evacuations. Now he directs his charge against the principle of gout; now against a suppressed gonorrhœa; now against a psoric acridity, anon against some other kind of acridity. He effects a change, but not the change he wished. Gradually, under the pretext of urgent business, the physician withdraws from the patient, comforting himself and at length the patient's friends when they press him for his opinion, that in such cases his art is too weak.

And that his so vaunted art is too weak, on this comfortable, soft pillow he reposes in cases of gout, consumption, old ulcers, contractions and so-called dropsies, cachexias of innumerable varieties, spasmodic asthmas, angina pectoris, pains, spasms, cutaneous eruptions, debility, mental affections of many kinds, and I know not how many other chronic diseases.

[1] We often read in the histories of cases, even of distinguished physicians, such observations as this: "I now gave the patient the bitter extracts"—as if the bitter vegetable substances were not all very various in their peculiar actions!

In no other case is the insufficiency of our art so strongly and so unpardonably manifested as in those distressing diseases from which hardly any family is altogether free; hardly any in which some one of the circle does not secretly sigh over ailments, for which he has tried the so-called skill of physicians far and near. In silence the afflicted sufferer steals on his melancholy way, borne down with miserable suffering, and, despairing in human aid, seeks a solace in religion.

"Yes," I hear the medical school whisper with a seeming compassionate shrug, "Yes, these are notoriously incurable evils; our books tell us they are incurable." As if it could comfort the million of sufferers to be told of the vain impotence of our art! As if the Creator of these sufferers had not provided remedies for them also, and as if for them the source of boundless goodness did not exist, compared to which the tenderest mother's love is as thick clouds beside the glory of the noonday sun!

"Yes," I hear the school continue to apologize, "the thousand defects in our civic constitution, the artificial, complicated mode of life so far removed from Nature, the chameleon-like luxury enervating and deranging our natural constitution, are answerable for the incurable character of all these evils. Our art is quite excused for being incapable of the cure of such cases."

Can you then believe that the Preserver of our race, the All-wise, did not design these complexities of our civic constitution and our artificial mode of life to increase our enjoyment here, and to remove misery and suffering? What extraordinary kind of living can that be to which man cannot accustom himself without any great

disturbance of his health? The fat of the seal and the train-oil eaten with bread made of dried fish-bones as little prevents the Greenlander from enjoying health in general, as does the unvaried milk-diet of the shepherds on the Swiss mountains, the purely vegetable food of the poorer Germans, or the highly animal diet of the wealthy Englishman. Does not the Vienna nobleman accustom himself to his twenty or thirty covers, and does he not enjoy just as much health as the Chinese with his thin rice soup, the Saxon miner with nothing but potatoes, the South Sea islander with his roasted bread-fruit, and the Scottish highlander with his oatmeal cakes?

I am ready to admit that the contest of conflicting passions and of many enjoyments, the luxurious refinement, and the absence of exercise in fresh air that prevail in the labyrinthine palaces of great cities, may give occasion to more numerous and more rare diseases than the simple uniformity that obtains in the airy hut of the humble villager. But that does not materially alter the matter. For our medical art is as impotent against the water-colic of the peasant of lower Saxony, the *tsömer* of Hungary and Transylvania, the *radesyge* of Norway, the *sibbens* of Scotland, the *hotme* of Lapland, the *pelagra* of Lombardy, the *plica polonica* of certain Sclavonic tribes, and various other diseases prevalent among the simple peasantry of various countries, as it is against the more aristocratic disorders of high life in our large towns. Must there be one kind of medical art for the former, and another for the latter; or if it were only once discovered, would it not be equally applicable to both? I should think so!

It may not certainly exist in our books, nor yet in our heads, nor be taught in our schools, but there is such a thing for all that; it is a possibility.

Occasionally a regular brother practitioner stumbles by a lucky hit upon a cure which astonishes half the world about him, and not less himself; but among the many medicines he employed he is by no means sure which did good. Not less frequently does the neck-or-nothing practitioner, without a degree, whom the world calls a quack, make as great and wonderful a cure. But neither he nor yet his worshipful brother practitioner with a diploma knows how to eliminate the evident and fruitful truth which the cure contains. Neither can separate and record the medicine which certainly was of use out of the mass of useless and obstructing ones they employed; neither precisely indicates the case in which it did good, and in which it will certainly benefit again. Neither knows how to abstract a truth which will hold good in all future time, an appropriate, certain, unfailing remedy for every such case that may occur hereafter. His experience in this case, remarkable though it seemed, will hardly ever be of service to him in any other. All that we learn is, that a helpful system of medicine is possible; but from these and a hundred other cases it is quite manifest that as yet it has not attained the rank of a science, that even the way has yet to be discovered how such a science is to be learned and taught. As far as we are concerned, it cannot be said to exist.

Meanwhile, among these brilliant but rare cures there are many (vulgarly called *Pferdekuren* [horse cures]), which, however great the noise

they might make, are not of a character to be imitated, *salti mortali*, madly desperate attempts by means of the most powerful drugs in enormous doses, which brought the patient into the most imminent danger, in which life and death wrestled for the mastery, and in which a slight unforeseen preponderance on the side of kind Nature gave the fortunate turn to the case: the patient recovered himself and escaped from the very jaws of death.

A treatment with a couple of scruples of jalap-resin to the dose is by no means inferior in severity to the helleborism of the ancient Greek and Roman physicians.

Such modes of treatment are not very unlike murders, the result alone renders them uncriminal, and almost imparts to them the lustre of a good action, the saving of a life.[1]

This cannot be the divine art, that like the mighty working of Nature should effect the greatest deeds simply, mildly, and unobservedly, by means of the smallest agencies.

The ordinary practice of the majority of our practitioners in their treatment of diseases resembles these horrible revolutionary cures. They partially attain their object, but in a hurtful way. Thus they have to treat, for example, an unknown disease accompanied by general swelling. On account of the swelling it is in their eyes a disease of daily occurrence; without hesitation they call it dropsy (just as if a single

[1] Thus a cruel usurper vibrates betwixt the scaffold and the throne, a small unfortunate accident brings his head to the block, and he dies amidst the curses of the nation: or a small moment of luck that did not enter into his calculations puts the crown on his head, and the same nation falls down and worships him.

symptom constituted the essential nature of the whole disease!), and they briskly set to work with the remark: "The water must be drawn off, and then all will be right." Away they go at it, attacking it with a frequent repetition of drastic (so-called hydragogue) purgatives, and, see! what a wonderful event takes place—the abdomen falls, the arms, the legs, and the face grow quite thin! "Look what I can do, what is in the power of my art; this most serious disease, the dropsy, is conquered! with only this slight disadvantage, that a new disease, which nobody anticipated, is come in its place (properly, has been brought on by the excessive purgation), a confounded lientery, which we must now combat with new weapons."

Thus the worthy man comforts himself from time to time, and yet it is impossible that such a procedure can be called a cure, where the disease, by means of violent unsuitable medicines, only loses a portion of its outward form and gains a new one; the change of one disease for another is not a cure.

The more I examine the ordinary cures, the more I am convinced, that they are not direct transformations of the disease treated into health, but revolutionizings, disturbances of the order of things by medicines, which, without being actually appropriate, possessed power enough to give matters another (morbid) shape. These are what are called cures.

"The hysterical ailments of yonder lady were successfully removed by me!"

No! they were only changed into a metrorrhagia. After some time I am greeted by a shout of triumph: "Excuse me! I have also

succeeded in putting a stop to the uterine hæmorrhage."

But do you not see how, on the other hand, the skin has become sallow, the white of the eye has acquired a yellow hue, the motions have become greyish-white, and the urine orange-coloured.

And thus the so-called cures go on like the shifting scenes of one and the same tragedy!

The most successful cases among them are still those where the revolution effected by the drug develops a new disease of such a sort, that Nature, so to speak, is so much occupied with it as to forget the old original disease and let it go about its business, and is engaged with the artificial one until some lucky circumstance liberates it from the latter. There are several kinds of such lucky circumstances. The leaving off of the medicine—youthful vigour—the commencement of the menstrual flow or its cessation at the proper periods of life—a fortunate domestic occurrence; or (but this is certainly of rare occurrence, still it sometimes happens like a ternion in the game of lotto) among the many medicines prescribed pell-mell, there lay one that was appropriate and adapted to the circumstances of the case—in all these instances a cure may occur.

In like manner, mistakes of the chemist respecting the medicines and signs in prescriptions have often been the occasion of wonderful cures. But are such circumstances recommendations for the (till now) most uncertain of all arts? I should rather think not.

By treatment the ordinary physician often understands nothing more than a powerful, violent attack upon the body with things that

are to be found in the chemist's shop, with an alteration of the diet, *secundum artem*, to one of a very extraordinary, very meagre character. "The patient must first be powerfully affected before I can do him any good; I wish I could but once get him regularly laid up in bed!" But that the transition from bed to the straw and the coffin is so very easy, infinitely easier than to health, he says nothing about that.

The physician of the stimulating school is in the habit of prescribing in almost every case an exactly opposite diet (such is the custom of his sect): ham, strong meat-soups, brandy, etc., often in cases where the very smell of meat makes the patient sick, and he can bear nothing but cold water; but he too is by no means sparing in his use of violent remedies in enormous doses.

The schools of both the former and the latter class authorize a revolutionary procedure of this sort: "No child's play with your doses," say they; "go boldly and energetically to work, giving them strong, as strong as possible!" And they are right if treating means the same thing as knocking down.

How does it happen that, in the thirty-five centuries since Æsculapius lived, this so indispensable art of medicine has made so little progress? What was the obstacle? for what the physicians have already done is not one hundredth part of what they might and ought to have done.

All nations, even remotely approaching a state of civilization, perceived, from the first, the necessity and inestimable value of this art; they acquired its practice from a caste who called

themselves physicians. These affected, in almost all ages, when they came in contact with the sick, to be in perfect possession of this art; but among themselves they sought to gloze over the gaps and inconsistencies of their knowledge by heaping system upon system, each made up of the diversified materials of conjectures, opinions, definitions, postulates, and predicates, linked together by scholastic syllogisms, in order to enable each leader of a sect to boast respecting his own system, that here he had built a temple for the goddess of health—a temple worthy of her—in which the inquirer would be answered by pure and salutary oracles.

It was only the most ancient times that formed an exception to this rule.

We were never nearer the discovery of the science of medicine than in the time of Hippocrates. This attentive, unsophisticated observer sought Nature in Nature. He saw and described the diseases before him accurately, without addition, without colouring, without speculation.[1] In the faculty of pure observation he has been surpassed by no physician that has followed him. Only one important part of the medical art was this favoured son of Nature destitute of, else had he been completely master of his art: the knowledge of medicines and their application. But he did not affect such a knowledge—he acknowledged his deficiency in that he gave almost no medicines (because he knew them too imperfectly), and trusted almost entirely to diet.

[1] The speculative writings under his name are not his, neither are the three last books of the aphorisms. The want of the Hippocratic Ionicisms, the absence of the very peculiar language of this man, must convince any one of this, who knows anything about such matters.

All succeeding ages degenerated and wandered more or less from the indicated path, the later sects of the empirics—worthy of all respect—and to a certain degree, Aretæus,[1] excepted.

Sophistical whimsicalities were pressed in to the service. Some sought the origin of disease in a universal hostile principle, in some poison which produced all maladies, and which was to be contended with and destroyed. Hence the universal antidote which was to cure all diseases, called *theriaca*, composed of an innumerable multitude of ingredients, and more lately the *mithridaticum*, and similar compounds, celebrated from the time of Nicander down almost to our own day. From these ancient times came the unhappy idea, that if a sufficient number of drugs were mixed in the receipt, it could scarcely fail to contain the one capable of triumphing over the enemy of health—while all the time the action of each individual ingredient was little, or not at all known. And to this practice Galen, Celsus, the later Greek and Arabian physicians, and, on the revival of the study of medicine in Bologna, Padua, Seville, and Paris, in the Middle Ages, the schools there established, and *all* succeeding ones, have adhered.

In this great period of nearly two thousand years, was the pure observation of disease neglected. The wish was to be more scientific, and to discover the hidden causes of diseases. These once discovered, then it were an easy (?) task to find out remedies for them. Galen devised a system for this purpose, his four qualities with

[1] Graphic as are his descriptions of disease, he yet only described them amalgamated together in complete classes, from many individual cases of disease: this Hippocrates did not do, but modern pathologists do it.

their different degrees; and until the last hundred and fifty years his system was worshipped over our whole hemisphere, as the *non plus ultra* of medical truth. But these phantoms did not advance the practical art of healing by a hair's-breadth; it rather retrograded.

After it had become more easy to communicate thought, to obtain a name by writing hypotheses, and when the writings of others could be more cheaply read—in a word, after the discovery of printing—the systems rapidly increased, and they have crowded one on another up to our own day. There was now the influence of the stars, now that of evil spirits and witchcraft; anon came the alchymist with his salt, sulphur, and mercury; then Silvius, with his acids, biles, and mucus; then the iatromathematicians and mechanical sect, who explained everything by the shape of the smallest parts, their weight, pressure, friction, etc.; to these succeeded the humoral pathologists, with certain acridities of the fluids; then the tone of the fibres and the abnormal state of the nerves was insisted on by the solidists; then, according to Reil, much was due to the internal composition and form of the most minute parts, while the chemists found a fruitful cause of disease in the development of various gases. How Brown explained disease with his theory of excitability, and how he wished to embrace the whole art with a couple of postulates, is still fresh in our recollection; to say nothing of the ludicrously lofty, gigantic undertaking of the natural philosophers!

Physicians no longer tried to see diseases as they were; what they saw did not satisfy them, but they wished by *a priori* reasoning to find out an undiscoverable source of disease in regions

of speculation which are not to be penetrated by terrestrial mortal. Our system-builders delighted in these metaphysical heights, where it was so easy to win territory; for in the boundless region of speculation every one becomes a ruler who can most effectually elevate himself beyond the domain of the senses. The superhuman aspect they derived from the erection of these stupendous castles in the air concealed their poverty in the art of healing.

"But, since the discovery of printing, the preliminary sciences of the physician, especially natural history and natural philosophy, and, in particular, the anatomy of the human body, physiology, and botany, have greatly advanced."

True: but it is worthy of the deepest reflection how it comes that these useful sciences, which have so manifestly increased the knowledge of the physician, have contributed so little to the improvement of his art; their direct influence is most insignificant, and the time was when the abuse of these sciences obstructed the practical art of healing.

Then the anatomist took upon him to explain the functions of the living body; and, by his knowledge of the position of the internal parts, to elucidate even the phenomena of disease. Then were the membranes, or the cellular tissue of one intestine, continuations of the membranes or cellular tissue or another or of a third intestine; and so, according to them, was the whole mystery of the metastasis of diseases unravelled to a hair. If that did not prove sufficient, they were not long in discovering some nervous filament to serve as a bridge for the transportations of a disease from one part of the body to another,

or some other unfruitful speculations of the same kind. After the absorbents were discovered, anatomy immediately took upon herself to instruct physicians in what way medicines must permeate them, in order to get to that spot of the body where their remedial power was wanted; and there were many more of such material demonstrations put forward, much to the retardation of our art. It often reigned despotically, and refused to acknowledge every physician who handled his scalpel otherwise than according to the mode taught in the schools —who could not, without hesitation, give the name of each little depression on the surface of a bone, who could not, on the instant, give the origin and insertion of every smallest muscle (which sometimes only owed its individual existence to the scalpel). The examination of a physician for a degree consisted almost solely in anatomy: this he was obliged to know off by heart, with a most pedantic precision; and if he did this, then he was prepared to practise.

Physiology, until Haller's time, looked only through the spectacles of hypothetical conceits, gross mechanical explanations, and pretensions to systems, until this great man undertook the task of founding the knowledge of the phenomena of the human body upon sensible observation and truthful experience alone. Little has been added since his time, except so far as newly discovered products, newly discovered physical powers and laws, have conspired to explain the constitution of our frame. But from these, little has been incontrovertibly established.

In general, natural philosophy often offered its services, somewhat presumptuously, to explain the phenomena in the healthy and diseased

body. Then were the manifest laws which, in the inorganic world, regulate the extrication, confinement, and diffusion of caloric, and the phenomena of electricity and galvanism, applied, without change and without any exception, to the explanation of vital operations; and there were many premature conclusions of a similar kind.

But none of the preliminary sciences has assumed so arrogant a place as chemistry. It is, indeed, a fact that chemistry explains certain appearances of the healthy as well as the diseased body, and is a guide to the preparation of various medicines; but it is incredible how often it has usurped the right of explaining all physiological and pathological phenomena, and how much it has distinguished itself by authorizing this or that medicine. Gren, Tromsdorff, and Liphardt may serve as warning examples of this.

It is, I repeat, a matter for most serious reflection, that while these accessory sciences of medicine (in themselves most commendable) have advanced within these last ten years to a height and a maturity which seems not to be capable of much further advancement, yet, notwithstanding, they have had no marked beneficial influence on the treatment of disease.

Let us consider how this has happened.

Anatomy shows us the outside of every part which can be separated with the knife, the saw, or by maceration; but the deep internal changes it does not enable us to see; even when we examine the intestines, still it is only a view of the outside of these internal surfaces that we obtain; and even were we to open live animals, or, like Herophilus, of cruel memory, dissect men alive, so little could we penetrate the minute

structure of parts lying remote from view, that even the most inquisitive and attentive observer would relinquish the task in dissatisfaction. Nor do we make much greater discoveries with the microscope, unless the refracting power favour us with optical illusions. We see only the outside of organs, we see only their grosser substance; but into the innermost depths of their being, and into the connection of their secret operations no mortal eye can ever pierce.

By means of pure observation and unprejudiced reflection, in connection with anatomy, natural philosophy, and chemistry, we have a considerable store of very probable conclusions regarding the operations and vital phenomena of the human body (*physiology*), because the phenomena in what is called a healthy body remain pretty constant, and hence can be observed frequently and, for the purposes of comparison, from all the different points of view afforded by the various branches of knowledge bearing upon them. But it is no less true than striking and humbling that this anthropological or physiological knowledge begins to prove of no use as soon as the system departs from its state of health. All explanations of *morbid* processes, from what we know of healthy ones, are deceptive, approaching more or less to what is untrue; at all events, positive proofs of the reality and truth of these transferred explanations are unattainable; they are from time to time refuted by the highest of all tribunals—experience. Just because an explanation answers for the healthy state of the frame, it will not answer for the diseased. We may admit it or not as we please, but it is too true, that in the moment when we attempt to regard the state of the disease physiologically,

there drops before our previously clear light of physiology a thick veil—a partition which prevents all vision. Our physiological skill is quite at fault when we have to explain the phenomena of morbid action. There is almost no part of it applicable! True, we can give a sort of far-fetched explanation, by making a forced transference and application of the physiological systems to pathological phenomena; but it is only illusory and misleads into error.

Chemistry should never attempt to offer an explanation of the abnormal performances of the functions in the diseased body, since it is so unsuccessful in explaining them in the healthy state. When it predicts what, according to its laws, must happen, then something quite different takes place; and if the vitality overmasters chemistry in the healthy body, how much more must it do so in the diseased, which is exposed to the influence of so many more unknown forces. And just as little should chemistry undertake to give a decision upon the suitableness or worthlessness of medicines, for it is altogether out of its sphere of vision to determine what is properly healing or hurtful, and it possesses no principles and no standard by which the healing efficacy of medicines, in different diseases, can be measured or judged of.

Thus has the healing artist for ever stood alone—I might say forsaken—forsaken by all his renowned auxiliary sciences—forsaken by all his transcendental explanations and speculative systems. All these assistants were mute, when, for example, he stumbled upon an intermittent fever which would not yield to purgatives and cinchona bark.

"What is to be done here? what is with *sure*

confidence to be set about?" he inquires of these his oracles.—Profound silence.—(And thus they remain silent up to the present hour, in most cases, these fine oracles.)

He reflects upon the matter, and comes, after the fashion of men, to the foolish notion, that his uncertainty what to do here arises from his not knowing the *internal* nature of intermittent fever.—He searches in his books, in some twenty of the most celebrated systematic works, and finds (unless they have copied from one another) as many different explanations of intermittent fever as books he examines. Which of them is he to take for his guide? They contradict one another.

By this road he finds he will make no progress.

He will let intermittent fever just be intermittent fever; and turn his attention solely to learn what medicines the experience of bygone ages has discovered for intermittent fever, besides cinchona bark and evacuants. He proceeds to search, and to his amazement discovers that an immense number of medicines have been celebrated in intermittent fever.

Where is he to begin? Which medicine is he to give first; which next, and which last? He looks round for aid, but no directing angel appears, no *Hercules in bivio*, no heavenly inspiration whispers in his ear which of all the number he ought to select.

What is more natural, what more appropriate to the weakness of man, than that he should adopt the unhappy resolution (the resolution of almost all ordinary physicians in similar cases!). "that as he has nothing to direct his choice to the best, he had better give *a number* of the most celebrated febrifuge medicines *mixed together in*

one prescription. How will he ever otherwise get to the end of the long list, unless he take several at a time? As he can find no one who can tell him if there is any difference in the actions of these different substances, he considers it better to mix together many than few;[1] and if the operation of each of these different ingredients really differs from that of the others, it would certainly, he thinks, be better, in this case, to collect several and many such reputedly antifebrile substances in one receipt."

"Among the many substances in his elixirs, pills, electuaries, mixtures, and infusions, surely (thus he philosophizes) there must be *one* which will do good. Perhaps the most effectual happens also to be the freshest and most powerful medicine therein; and perhaps the substances less adapted or even obstructive to the cure are happily the weakest in yonder chemist's shop. Perhaps! yes we must hope for the best, and trust to good luck!"

Periculosæ plenum opus aleæ! What are we

[1] The learned excuse for the great complexity of our ordinary prescriptions, "that most of the ingredients were added from rational reasons, that is to say, on account of the particular indications in each case—and that regular prescriptions must have an orthodox form, *a basis* (fundamental medicine), *a corrective* (something added in order to correct the faults of the basis), *an adjuvant* (an auxiliary substance to support the weakness of the basis), and *an excipient* (a substance that supplies the form and vehicle)—is partly palpable school-cunning, like the latter excuse—partly fancy, like the former. For why does the opium you add not cause sleep, why do your additions of neutral salts fail to open the bowels, and your *aqua sambuci* to keep the skin moist? Why does that not happen, as a rule, for which you added each particular substance, if it was properly indicated as you allege?

to think of a science, the operations of which are founded upon *perhapses* and blind chance?

But suppose the first or second or all the trains of mixed drugs have not done any good, then I must ask: Whence did your authors derive the information, that A or B, or Y or Z, was useful in intermittent fever?

"It stands written of each of these remedies in the works on Materia Medica."

But whence is their knowledge obtained? Do the authors of these books anywhere assert that they themselves have given each of these substances alone and uncombined in intermittent fever?

"Oh no! Some give authorities, or quote other works on Materia Medica; others make the statement without any reference to its source."

Turn up the original authorities!

"The most of these have been convinced not by personal experience; they again refer to some antiquated works on Materia Medica, or such authorities as these: Ray, Tabernæmontanus, Trajus, Fuchs, Tournefort, Bauhin, and Lange."

And these?

"Some of them refer to the results of domestic practice;—peasants and uneducated persons, in this or that district, have found this or that medicine useful in a particular case."

And the other authorities?

"Why, they aver that they did not give the medicine by itself, but, as it became learned physicians to do, combined with other simples, and found advantage from it. Still it was their impression that it was this drug, and not the other simples, that was of service."

A fine thing to rely on truly, a most delightful

conviction, grounded upon opinions destitute even of probability!

In one word: the primary origin of almost all authorities for the action of a simple medicine is derived, either from the confused use of it, in combination with other drugs, or from domestic practice, where this or that unprofessional person had tried it with success in this or that disease (as if an unprofessional person could distinguish one disease from another).

Truly this is a most unsatisfactory and turbid source for our proud Materia Medica. For if some of the common people had not, at their own risk, undertaken experiments, and communicated the results of these, we should not have known even the little we do at present about the action of most medicines. For, with the exception of a few distinguished men, to wit, Conrad Gesner, Stoerk, Cullen, Alexander, Coste, Willemet, have done, by administering *simple* medicines alone and uncombined, in certain diseases, or to persons in health, the rest is nothing but opinion, illusion, deception. Marcus Herz thought the water-hemlock cured phthisis, although he gave it combined with various other drugs.[1] On the other hand, to me the statement of Lange (in his *Med. Domest. Brunsv.*) is of much greater weight, namely, that the common people have employed it uncombined in this disease, frequently with good

[1] This is the general but most unjustifiable procedure of our medical practitioners: to prescribe *nothing by itself*—no, *always in combination with several other things* in an artistic prescription! "No prescription can be properly termed such," says Hofrath Gruner in his *Art of Prescribing*, "which does not contain several ingredients at once"—so, in order to see clearer, you had better put out your eyes!

effect, than what the worthy doctor *thought;* and for this simple reason, because he gave it mixed with other drugs, while the others gave it simply by itself.

The Materia Medica of remote antiquity was not worse furnished. Its sources were then the histories of cures effected by simples, recorded in the votive tablets; and Dioscorides and Pliny have manifestly derived their account of the operation of simple medicines from the rude observations of the common people. Thus, after the lapse of a couple of thousands of years, we are not a step advanced! The only source of our knowledge of the powers of medicines, how troubled is it! and the learned choir of physicians in this enlightened century, contents itself with it, in the most serious contingency of mortals, when the most precious of earthly possessions—life and health—are at stake! No wonder that the consequences are what they are.

He who, after such experience of the past, still expects that the art of medicine will ever make a single step towards perfection by this road, to such an one Nature has denied all capacity of distinguishing between the probable and the impossible.

To fill to the brim the measure of deception and misapprehension attending the administration of medicine to the sick, the order of apothecaries was instituted,—a guild which depends for existence on the complicated mixtures of drugs. Never will the complicated formulæ cease to prevail, as long as the powerful order of apothecaries maintains its great influence.

Unlucky period of the mediæval age, which produced a Nicolaus the ointment-maker (Myrep-

sus), from whose work the *Antidotaria* and *Codices Medicamentarii* were compiled in Italy and Paris; and in Germany at first in Nürnberg, about the middle of the sixteenth century, the first *Dispensatorium* was written, by the well-meant zeal of the youthful Valerius Cordus. Before these unhappy events, the apothecaries were merely unprivileged vendors of crude drugs, dealers in simples, druggists. (At the utmost, they might have some theriac, mithridate, and a few ointments, plasters, and syrups, of the Galenic stamp, ready on demand, but this was optional on their part.) The physician bought only from those who had genuine and fresh materials, and mixed these for himself, according to his own fancy; but nobody prevented him from giving them to his patients in their simple and uncombined state.

But from the time when the authorities introduced dispensatories—that is, books full of compound medicines, which were to be kept ready made—it became necessary to form the apothecaries into a close corporation, and to give them a monopoly (on condition that they should have always a stock of ready prepared medicinal mixtures), whereby their number was fixed and limited, in order that there should not be too many of them, which might cause these costly compounds to hang upon their hands and become spoilt.

It is true, that after the authorizing of the complicated mixtures in dispensatories, which was the first step to mischief, had been taken, the second—the granting a privilege of the exclusive sale of these expensive mixtures to apothecaries—was neither an unexpected nor an unjust proceeding; but had the public approval

of these senseless mixtures not preceded it, then the trade in single medicinal substances would have remained as it was at first; and there would have been no need of apothecaries' privileges, from which infinite injury has gradually accrued to the healing art.

The earliest dispensatories, and those nearly down to our own time, called each compound formula by an alluring name after the disease which it was to remove, and after each, the mode of its administration was described, and numerous commendations given of its virtues. By this the young physician was led to employ these compositions in preference to the simple medicines, especially as the former were authorized by the government.

The privileged apothecaries did what they could to increase the number of these formulas, for the profit derived from these mixtures was immensely greater than would have been derived from the sale of the simple drugs employed in their composition; and thus, gradually, the small octavo dispensatory of Cordus grew into huge folios (the Vienna, Prague, Augsburg, Brandenburg, Würtemburg, etc., dispensatories). And now there was no known disease for which the dispensatory had not certain ready-made compounds, or, at least, the formulas for them, accompanied by the most eulogistic recommendations of them. The professor of the healing art was now prepared, when he had such a receipt-book in his hand,—full of receipts for every disease sanctioned by the highest authorities in the land! What does he want more to make him perfect as a healer of disease? How easy has the great art been made to him!

It is only quite lately that a change has taken

place in the matter. The formulæ in the dispensatory have been shorn of their auctioneering titles, and the number, especially of those which were to be kept ready compounded, has been lessened. Still plenty of magisterial formulæ remain.

The spirit of the advancing age had at length expunged from the list of drugs the pearls and jewels, the costly bezoar, the unicorn, and other things, which were formerly so profitable to the apothecaries; simple processes for preparing the medicines were laid down; no one now required alcohol to be ten times rectified, or calomel twelve times distilled; and the establishment of more stringent price-regulations for the chemists threatened to convert their hitherto golden shops into silver ones, when things unobservedly took a turn more favourable to the apothecary, and more disastrous to the art of medicine.

The former medicinal laws[1] had already begun to restrict the compounding of the mixtures to the apothecaries, and thus, in some measures, to impose restrictions on the physicians. The more recent statutes completed the work by preventing physicians from converting the simple drugs into compound mixtures for themselves, as well as forbidding them to give any medicine directly to the patients, and, as the expression was, "to dispense."

Nothing could have been done better adapted to ruin the true art of medicine.

Such regulations may have been adopted from one of three reasons:—

1*st*. Was it owing to the notorious ignorance of the physicians of the present day, which

[1] For example, the *Constitutiones Frederici II Imperatoris*.

rendered them unable to prepare a tolerable combination of drugs, or even to measure out the simple medicines, that they were prevented from executing this mechanical operation on account of incompetence, as midwives are not allowed to use forceps? If this was the case (what a dreadful supposition!) how could they write a prescription, that is, directions for combining a variety of substances in the most proper manner, if they themselves were not masters of the operation which they described?

2nd. Or were they made in order to enrich the apothecaries, whose incomes suffered by the physicians themselves dispensing their medicines? If the whole system of medicine existed for the benefit of the apothecaries alone,—if people fell sick solely for the profit of apothecaries—if learned men became physicians, not so much for the purpose of curing the sick, as for the sake of assisting the apothecaries to make their fortunes—then there would be good reasons why the dispensing of medicines was forbidden to physicians, and a monopoly of it confirmed to the apothecaries alone.

3rd. Or were they passed for the benefit of patients? One would suppose that medicinal laws would be made chiefly for the benefit of the sick! Let us see, if it were possible that patients could be benefitted by these laws.

By not himself dispensing, the physician loses all dexterity, all practice in the manipulations necessary for the compounding together of various substances which generally act chemically on each other, and decompose one another more or less in this process or the other. He gradually becomes less experienced in this art, until at last he can no longer give any detailed

and consistent directions at all,[1] until at length he gives directions for compounding that are full of contradictions, and make him the laughing-stock of the apothecary. He is now completely at the mercy of the apothecary; and the doctor and patient must be content to take the medicine as the apothecary or his assistant (or even his shop-boy) pleases to compound it.

If the physician wants to order equal parts of myrrh rubbed up with camphor in the form of powder, he very likely does not know, from his want of acquaintance with pharmaceutical manipulations, that these two substances never can form a powder; but the longer these two dry substances are rubbed together, the more they become converted into a greasy mass, a kind of fluid. Then the apothecary either sends to the patient this soft mash, instead of a powder, with a sarcastic observation, much to the annoyance of the physician; or he deceives the doctor, to keep in his good graces, and gives the patient something different from what the doctor prescribed, some brown powder, smelling of camphor. Or the physician, perhaps, writes a prescription for hæmoptysis, consisting of alum and kitchen-salt rubbed together. Now, although each of these substances, separately, is dry, yet out of the triturated combination no powder results, but a fluid, which the physician, not

[1] It soon comes to this, indeed this is almost universally the case; the physician no longer attempts to invent a prescription for himself, he must copy all his prescriptions from some well-known prescription manual, in order to avoid the danger of committing pharmaceutical blunders and contradictions, if he attempted to compose a prescription for himself.

himself accustomed to dispense, could never have anticipated. What will the apothecary do in a case like this? He must either annoy or deceive the writer of the prescription.

Now, can these and a thousand other similar collisions tend to the welfare of the patient?

Errors, mistakes of every kind, which the apothecary or his assistants commit in the preparation of the compound, through ignorance, hurry, confusion, inaccuracy, or deceit from interested motives, are, to the man of science and knowledge, who wishes to test such a combination, a problem, which, when vegetable substances constitute the ingredients, it often defies his powers to solve,—how much more so for a physician who has never had an opportunity of acquiring a practical knowledge of pharmacy, or of compounding the medicines himself, indeed is prohibited from doing so! How is he ever to discover the adulterations or the mistakes which the person who makes up his prescription may have committed? If he cannot detect them (which, owing to such limitations of his knowledge, is very probable), what mischief must and does thence accrue to the patient! If he cannot detect them, what an object of ridicule he must be, when his back is turned, to the apothecary's shopboys!

By forbidding physicians themselves to dispense, the apothecary's income is secured in the most satisfactory manner. What regulations respecting the prices of drugs can check his overcharges? And even if the prices of the drugs are fixed by law, his conscience often does not prevent him from employing a cheaper substitute (*quid pro quo*), instead of the expensive one that is prescribed. Many apothecaries have carried

on this kind of deception to a great extent. This practice has been in vogue for more than fifteen hundred years. We may learn something of this sort from Galen's little book, entitled *Περὶ ἀντιβαλλομένων*; and the multitude of books which treat of the adulteration of drugs and deceptions practised by the apothecaries, constitute of themselves no small library.

How well adapted is the whole business of treatment for the welfare of the sick!

"But the medicinal regulations do not provide only for the apothecary, they are for the interest of the physician also! The latter gets fourpence for every prescription."

So, the same for a prescription that he copies out of a printed receipt book as for one that it takes him an hour to compose! Since that law was passed, of course he prefers making use of borrowed, ready-written (*i. e.* unsuitable) prescriptions; he can write a number of such ones in the course of a forenoon—but he must write a *great many more than are good for the patient*, because he is paid by the number of his prescriptions, and because he requires many fourpences in order to live, to live well, to live in style!

Alas! we may bid adieu to the progress of the art, to the cure of the sick!

Not to speak of the degradation to a learned man, to an artist of the highest rank, as the physician ought to be—to be paid by the number of his prescriptions (like the copyist by the number of the sheets he copies), or by the number of his courses (like a common messenger), it seems to me that the result is not commensurate with the arrangement. The physician becomes a mechanical workman, his

occupation becomes a labour that requires the least reflection of all trades; he writes prescriptions (it matters not what) for whose effect he is not answerable, and he pockets his money.

How can he be made responsible for the result, when he does not prepare the medicine himself?[1] The preparation is entrusted by the state to another (the apothecary), who also is not answerable for the result (except in the case of palpable, enormous mistakes), and over whom we have no control with respect to many inaccuracies in the preparation of compound medicines, for after the mixture is made, it is absolutely impossible in many cases to prove that which ought to be proved against him.

From the very nature of the thing—it concerns the cure of the noblest of created beings, it concerns the saving of human life, the most difficult, the most sublime, the most important of all imaginable occupations!—from the very nature of the thing, I repeat, the physician should be prohibited, under the severest penalties, from allowing any other person to prepare the medicines required for his patients; he should be required, under the severest penalties, to prepare them himself, so that he may be able to vouch for the result.

But that it should be forbidden to the

[1] Properly speaking, the business of treatment is a kind of contract which the patient makes with the *physician* alone: *do ut facias*. The physician solemnly promises to give his aid and to administer efficacious medicines prepared in the best way—a promise which, with such legal arrangements, he cannot redeem, and which can only be performed by a third party, the apothecary, who is not bound by any contract to the patient. What inconsistency!

physician to prepare his own instruments for the saving of life—no human being could have fallen on such an idea *a priori*.

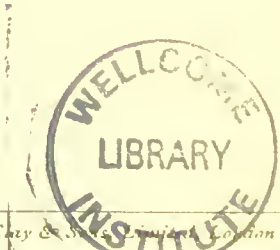
It would have been much more sensible to prohibit authoritatively Titian, Guido Reni, Michael Angelo, Raphael, Correggio or Mengs from preparing their own instruments (their expressive, beautiful and durable colours), and to have ordered them to purchase them in some shop indicated! By the purchased colours, not prepared by themselves,[1] their paintings, far from being the inimitable masterpieces they are, would have been ordinary daubs and mere market goods. And even had they all become mere common market goods, the damage would not have been so great as if the life of even the meanest slave (for he too is a man!) should be endangered by untrustworthy health-instruments (medicines) purchased from and prepared by strangers.

Under these regulations should there happen to be one single physician who should wisely wish to avoid that injudicious mode of prescribing multifarious mixtures of medicines, and for the weal of his patients and the furtherance of his art should wish to prescribe simple medicines in their genuineness, he would be abused in every apothecary's shop until he abandoned a method that was so little profitable to the apothecary's purse; he must take his choice of either being harassed to death or of abandoning it and again writing compound prescriptions. In this

[1] I never knew any great enamel-painter who did not require to prepare his own colours, if he wished to have permanent, brilliant colours, and to produce masterpieces; if he be forbidden to prepare his own colours he will not be able to furnish any but wretched daubs.

case what course would ninety-nine doctors out of a hundred choose? Do you know? I do!

Therefore adieu to all progress in our art! Adieu to the successful treatment of the sick!



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(*See also* TRAVEL)
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Franklin's (Benjamin) Autobiography. 316
Froude's Life of Benjamin Disraeli, Earl of Beaconsfield. 666
L Gaskell's (Mrs.) Life of Charlotte Brontë. Intro. by May Sinclair. 318
Gibbon (Edward), Autobiography of. Intro. by Oliphant Smeaton. 511
(*See also* HISTORY)
Gladstone, Life of. By G. W. E. Russell ('Onlooker'). 661
Hastings (Warren), Life of. By Capt. L. J. Trotter. 452
Helps' (Sir Arthur) Life of Columbus. 332
Hodson, of Hodson's Horse. By Capt. L. J. Trotter. 401
Holmes' Life of Mozart. Introduction by Ernest Newman. 564
Houghton's Life and Letters of Keats. Introduction by Robert Lynd. 801
Hutchinson (Col.), Memoirs of. Intro. Monograph by F. P. G. Guizot. 317
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(*See also* ESSAYS *and* FOR YOUNG PEOPLE)
Lewes' Life of Goethe. Introduction by Havelock Ellis. 269
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(*See also* ORATORY)
Lockhart's Life of Robert Burns. Introduction by E. Rhys. 156
L " Life of Napoleon. 3
" Life of Sir Walter Scott (abridged). 55
Mazzini, Life of. By Bolton King, M.A. 562
Newcastle (First Duke of), Life of, and other writings by the Duchess of Newcastle. 722

BIOGRAPHY—*continued*

Outram (Sir J.), The Bayard of India. By Capt. L. J. Trotter. 396
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" Poet at the Breakfast Table. 68

" Professor at the Breakfast Table. 67

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(*See also* HISTORY)

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(*See also* FICTION)
L Thoreau's Walden. Introduction by Walter Raymond. 281
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Tytler's Essay on the Principles of Translation. 168
Walton's Compleat Angler. Introduction by Andrew Lang. 70

FICTION

Aimard's The Indian Scout. 428
L Ainsworth's (Harrison) Old St. Paul's. Intro. by W. E. A. Axon. 522
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L Austen's (Jane) Emma. Introduction by R. B. Johnson. 24
" " Mansfield Park. Introduction by R. B. Johnson. 23
L " " Northanger Abbey and Persuasion. Introduction by R. B. Johnson. 25
L " " Pride and Prejudice. Introduction by R. B. Johnson. 22
L " " Sense and Sensibility. Intro. by R. B. Johnson. 21
Balzac's (Honoré de) Athelst's Mass. Preface by George Saintsbury. 229
" " Catherine de Médici. Introduction by George Saintsbury. 419
" " Christ in Flanders. Introduction by George Saintsbury. 284
" " Cousin Pons. Intro. by George Saintsbury. 463
" " Eugenie Grandet. Intro. by George Saintsbury. 169
" " Lost Illusions. Intro. by George Saintsbury. 656
" " Old Goriot. Introduction by George Saintsbury. 170
L " " The Cat and Racket, and Other Stories. 349
" " The Chouans. Intro. by George Saintsbury. 285
" " The Country Doctor. Intro. George Saintsbury. 530
" " The Country Parson. 686
" " The Quest of the Absolute. Introduction by George Saintsbury. 286
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" " Ursule Mirouët. Intro. by George Saintsbury. 733
Barbusse's Under Fire. Translated by Fitzwater Wray. 798

‡ Beaumont's (Mary) Joan Seaton. Intro. by R. F. Horton, D.D. 597
L Bennett's (Arnold) The Old Wives' Tale. 919
L Blackmore's (R. D.) Lorna Doone. 304
L ,, ,, Springhaven. 350
L Borrow's Lavengro. Introduction by Thomas Seccombe. 119
L ,, Romany Rye. 120 (*See also* TRAVEL)
L Brontë's (Anne) The Tenant of Wildfell Hall and Agnes Grey. 685
L ,, (Charlotte) Jane Eyre. Introduction by May Sinclair. 287
L ,, ,, Shirley. Introduction by May Sinclair. 288
L ,, ,, The Professor. Introduction by May Sinclair. 417
L ,, ,, Villette. Introduction by May Sinclair. 351
L ,, (Emily) Wuthering Heights. 243
L Burney's (Fanny) Evelina. Introduction by R. B. Johnson. 352
L Butler's (Samuel) Erewhon and Erewhon Revisited. Introduction by Desmond MacCarthy. 881
,, ,, The Way of All Flesh. Introduction by A. J. Hoppé. 895
L Collins' (Wilkie) The Woman in White. 464
Conrad's Lord Jim. Introduction by R. B. Cunninghame Graham. 925
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Hard Times. 292
L Little Dorrit. 293
L Martin Chuzzlewit. 241
L Nicholas Nickleby. 238
L Old Curiosity Shop. 173
L Oliver Twist. 233
L Our Mutual Friend. 294
L Pickwick Papers. 235
L Reprinted Pieces. 744
Sketches by Boz. 237
L Tale of Two Cities. 102
L Uncommercial Traveller. 536
Disraeli's Coningsby. Introduction by Langdon Davies. 535
Dostoevsky's (Fyodor) Crime and Punishment. Introduction by Laurence Irving. 501
,, ,, Letters from the Underworld and Other Tales. Translated by C. J. Hogarth. 654
,, ,, Poor Folk and The Gambler. Translated by C. J. Hogarth. 711
,, ,, The Possessed. Introduction by J. Middleton Murry. 2 vols. 861–2 [533
,, ,, Prison Life in Siberia. Intro. by Madame Stepniak.
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,, ,, The Idiot. 682
Du Maurier's (George) Trilby. Introduction by Sir Gerald du Maurier With the original Illustrations. 863
Dumas' Black Tulip. Introduction by Ernest Rhys. 174
,, Chicot the Jester. 421
,, Le Chevalier de Maison Rouge. Intro. by Julius Bramont. 614
,, Marguerite de Valois ('La Reine Margot'). 326
L ,, The Count of Monte Cristo. 2 vols. 393–4
,, The Forty-Five. 420
L ,, The Three Musketeers. 81
,, The Vicomte de Bragelonne. 3 vols. 593–5
L ,, Twenty Years After. Introduction by Ernest Rhys. 175
Edgar's Cressy and Poictiers. Introduction by Ernest Rhys. 17
,, Runnymede and Lincoln Fair. Intro. by L. K. Hughes. 320
(*See also* FOR YOUNG PEOPLE)
Edgeworth's Castle Rackrent and The Absentee. 410
L Eliot's (George) Adam Bede. 27
,, ,, Felix Holt. 353
,, ,, Middlemarch. 2 vols. 854–5
L ,, ,, Mill on the Floss. Intro. Sir W. Robertson Nicoll. 325
L ,, ,, Romola. Introduction by Rudolf Direks. 231
L ,, ,, Scenes of Clerical Life. 468

L Eliot's (George) Silas Marner. Introduction by Annie Matheson. 121
L English Short Stories. An Anthology. 743
Erckmann-Chatrian's The Conscript and Waterloo. 354
" " The Story of a Peasant. Translated by C. J. Hogarth. 2 vols. 706–7
L Fenimore Cooper's The Deerslayer. 77
L " " The Last of the Mohicans. 79
" " The Pathfinder. 78
" " The Pioneers. 171
" " The Prairie. 172
Ferrier's (Susan) Marriage. Introduction by H. L. Morrow. 816
Fielding's Amelia. Intro. by George Saintsbury. 2 vols. 852–3
" Jonathan Wild, and The Journal of a Voyage to Lisbon. Introduction by George Saintsbury. 877
" Joseph Andrews. Introduction by George Saintsbury. 467
L " Tom Jones. Intro. by George Saintsbury. 2 vols. 355–6
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L Galsworthy's (John) The Country House. 917
Galt's Annals of a Parish. Introduction by Baillie Macdonald. 427
Gaskell's (Mrs.) Cousin Phillis, etc. Intro. by Thos. Seccombe. 615
L " Cranford. 83
" Mary Barton. Introduction by Thomas Seccombe. 598
" North and South. 680
" Sylvia's Lovers. Intro. by Mrs. Ellis Chadwick. 524
Gleig's (G. R.) The Subaltern. 708
Goethe's Wilhelm Meister. Carlyle's Translation. 2 vols. 599–600
(*See also* ESSAYS and POETRY)
Gogol's (Nicol) Dead Souls. Translated by C. J. Hogarth. 726
" " Taras Bulba and Other Tales. 740
L Goldsmith's Vicar of Wakefield. Introduction by J. M. D. 295
(*See also* ESSAYS *and* POETRY)
Goncharov's Oblomov. Translated by Natalie Duddington. 878
Gorki's Through Russia. Translated by C. J. Hogarth. 741
‡ Gotthelf's Ulric the Farm Servant. Ed. with Notes by John Ruskin. 228
Harte's (Brot) Luck of Roaring Camp and other Tales. 681
Hawthorne's The House of the Seven Gables. Intro. by Ernest Rhys. 176
L " The Scarlet Letter. 122
" The Blithedale Romance. 592
" The Marble Faun. Intro. by Sir Leslie Stephen. 424
" Twice Told Tales. 531
(*See also* FOR YOUNG PEOPLE)
L Hugo's (Victor) Les Misérables. Intro. by S. R. John. 2 vols. 363–4
L " " Notre Dame. Introduction by A. C. Swinburne. 422
L " " Toilers of the Sea. Introduction by Ernest Rhys. 509
Italian Short Stories. Edited by D. Pettoello. 876
James's (G. P. R.) Richelieu. Introduction by Rudolf Dircks. 357
L James's (Henry) The Turn of the Screw and The Aspern Papers. 912
Kingsley's (Charles) Alton Locke. 462
L " " Hereward the Wake. Intro. by Ernest Rhys. 296
L " " Hypatia. 230
L " " Westward Ho; Introduction by A. G. Grieve. 20
" " Yeast. 611
(*See also* POETRY *and* FOR YOUNG PEOPLE)
" (Henry) Geoffrey Hamlyn. 416
" Ravenshoe. 28
L Lawrence's (D. H.) The White Peacock. 914
Lever's Harry Lorrequer. Introduction by Lewis Melville. 177
L Loti's (Pierre) Iceland Fisherman. Translated by W. P. Baines. 920
L Lover's Handy Andy. Introduction by Ernest Rhys. 178
L Lytton's Harold. Introduction by Ernest Rhys. 15
L " Last Days of Pompeii. 80
" Last of the Barons. Introduction by R. G. Watkin. 18
" Rienzi. Introduction by E. H. Blakeney, M.A. 532
(*See also* TRAVEL)
MacDonald's (George) Sir Gibbie. 678
(*See also* ROMANCE)
Manning's Mary Powell and Deborah's Diary. Intro. by Katherine Tynan (Mrs. Hinkson). 324

Manning's Sir Thomas More. Introduction by Ernest Rhys. 19
Marryat's Jacob Faithful. 618
L " Mr. Midshipman Easy. Introduction by R. B. Johnson. 82
" Percival Keene. Introduction by R. Brimley Johnson. 358
" Peter Simple. Introduction by R. Brimley Johnson. 232
" The King's Own. 580
(*See also* FOR YOUNG PEOPLE)
Manpassant's Short Stories. Translated by Marjorie Laurie. Introduction by Gerald Gould. 907
Melville's (Herman) Moby Dick. Introduction by Ernest Rhys. 179
" " Omoo. Introduction by Ernest Rhys. 297
" " Typee. Introduction by Ernest Rhys. 180
L Meredith's (George) The Ordeal of Richard Feverel. 916
Mérimée's Carmen, with Prévost's Manon Lescaut. Introduction by Philip Henderson. 834
Mickiewicz's (Adam) Pan Tadeusz. 842
Morier's Hajji Baba. 679
Mulock's John Halifax, Gentleman. Introduction by J. Shaylor. 123
Neale's (J.M.) The Fall of Constantinople. 655
‡ Oliphant's (Mrs.) Salem Chapel. Intro. by Sir W Robertson Nicoll. 244
Paltock's (Robert) Peter Wilkins; or, The Flying Indians. Introduction by A. H. Bullen. 676
Pater's Marius the Epicurean. Introduction by Osbert Burdett. 903
Peacock's Headlong Hall and Nightmare Abbey. 327
L Poe's Tales of Mystery and Imagination. Intro. by Padraic Colum. 336
(*See also* POETRY)
Prévost's Manon Lescant, with Mérimée's Carmen. Introduction by Philip Henderson. 834
Pushkin's (Alexander) The Captain's Daughter and Other Tales. Trans. by Natalie Duddington. 898
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Reade's (C.) Peg Woffington and Christie Johnstone. 299
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Sand's (George) The Devil's Pool and François the Waif. 534
Scheffel's Ekkehard: a Tale of the Tenth Century. 529
Scott's (Michael) Tom Cringle's Log. 710

SIR WALTER SCOTT'S WORKS:

L Abbot, The. 124
Anne of Gelerstein. 125
L Antiquary, The. 126
Black Dwarf and Legend of Montrose. 128
Bride of Lammermoor. 129
Castle Dangerous and The Surgeon's Daughter. 130
Count Robert of Paris. 131
L Fair Maid of Perth. 132
Fortunes of Nigel. 71
L Guy Mannering. 133
L Heart of Midlothian, The. 134
Highland Widow and Betrothed. 127
L Ivanhoe. Intro. by Ernest Rhys. 16
L Kenilworth. 135
L Monastery, The. 136
L Old Mortality. 137
Peveril of the Peak. 138
Pirate, The. 139
L Quentin Durward. 140
L Redgauntlet. 141
L Rob Roy. 142
St. Ronan's Well. 143
L Talisman, The. 144
L Waverley. 75
L Woodstock. Intro. by Edward Garnett. 72
(*See also* BIOGRAPHY *and* POETRY)

Shehedrin's The Golovlyov Family. Translated by Natalie Duddington. Introduction by Edward Garnett. 908
Shelley's (Mary Wollstonecraft) Frankenstein. 616
‡ Sheppard's Charles Auchester. Intro. by Jessie M. Middleton. 505
Sienkiewicz (Henryk). Tales from. Edited by Monica M. Gardner. 871
Shorter Novels, Vol. I. Elizabethan and Jacobean. Edited by Philip Henderson. 824
" " Vol. II. Jacobean and Restoration. Edited by Philip Henderson. 841
" " Vol. III Eighteenth Century (Beckford's Vathek, Walpole's Castle of Otranto, and Dr. Johnson's Rasselas). 856
Smollett's Peregrine Pickle. 2 vols. 838–9
" Roderick Random. Introduction by H. W. Hodges. 790
L Sterne's Tristram Shandy. Introduction by George Saintsbury. 617
(*See also* ESSAYS)

FICTION—*continued*

L Stevenson's Dr. Jekyll and Mr. Hyde, The Merry Men, and Other Tales. 767
L ,, The Master of Ballantrae and The Black Arrow. 764
L ,, Treasure Island and Kidnapped. 763
,, St. Ives. Introduction by Ernest Rhys. 904
(*See also* ESSAYS, POETRY, *and* TRAVEL)
Surtees' Jorrocks' Jaunts and Jollities. 817
Thackeray's Christmas Books. Introduction by Walter Jerrold. 359
L ,, Esmond. Introduction by Walter Jerrold. 73
,, Newcomes. Introduction by Walter Jerrold. 2 vols. 465–6
,, Pendennis. Intro. by Walter Jerrold. 2 vols. 425–6
,, Roundabout Papers. 687
L ,, Vanity Fair. Introduction by Hon. Whitelaw Reid. 293
,, Virginians. Introduction by Walter Jerrold. 2 vols. 507–8
(*See also* ESSAYS)
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,, Master and Man, and other Parables and Tales. 469
,, War and Peace. 3 vols. 525–7
Trollope's (Anthony) Barchester Towers. 30
,, ,, Dr. Thorne. 360
,, ,, Framley Parsonage. Intro. by Ernest Rhys. 181
,, ,, The Golden Lion of Granpère. Introduction by Hugh Walpole. 761
,, ,, The Last Chronicle of Barset. 2 vols. 391–2
,, ,, Phineas Finn. Intro. by Hugh Walpole. 2 vols. 832–3
,, ,, The Small House at Allington. 361
,, ,, The Warden. Introduction by Ernest Rhys. 182
Turgenev's Fathers and Sons. Translated by C. J. Hogarth. 742
,, Liza. Translated by W. R. S. Ralston. 677
,, Virgin Soil. Translated by Rochelle S. Townsend. 528
L Walpole's (Hugh) Mr. Perrin and Mr. Traill. 918
L Wells's (H. G.) The Time Machine and The Wheels of Chance. 915
Whyte-Melville's The Gladiators. Introduction by J. Mavrogordato. 523
Wood's (Mrs. Henry) The Channings. 84
Yonge's (Charlotte M.) The Dove in the Eagle's Nest. 329
,, ,, The Heir of Redclyffe. Intro. Mrs. Meynell. 362
(*See also* FOR YOUNG PEOPLE)
Zola's (Emile) Germinal. Translated by Havelock Ellis. 897

HISTORY

Anglo-Saxon Chronicle, The. Translated by James Ingram. 624
Bede's Ecclesiastical History, etc. Introduction by Vida D. Scudder. 479
Burnet's History of His Own Times. 85
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(*See also* BIOGRAPHY *and* ESSAYS)
L Creasy's Decisive Battles of the World. Introduction by E. Rhys. 300
De Joinville (*See* Villehardouin)
Duruy's (Jean Victor) A History of France. 2 vols. 737–8
Finlay's Byzantine Empire. 33
,, Greece under the Romans. 185
Froude's Henry VIII. Intro. by Llewellyn Williams, M.P. 3 vols. 372–4
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,, Mary Tudor. Intro. by Llewellyn Williams, M.P., B.C.L. 477
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Irving's (Washington) Conquest of Granada. 478
(*See also* ESSAYS *and* BIOGRAPHY)
Josephus' Wars of the Jews. Introduction by Dr. Jacob Hart. 712
Lützow's History of Bohemia. 432
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(*See also* ESSAYS *and* ORATORY)

HISTORY—*continued*

Machiavelli's History of Florence. 376
(*See also* ESSAYS)
Maine's (Sir Henry) Ancient Law. 734
Merivale's History of Rome. (An Introductory vol. to Gibbon.) 433
Mignet's (F. A. M.) The French Revolution. 713
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,, Conquest of Peru. Intro. by Thomas Seccombe, M.A. 301
Sismondi's Italian Republics. 250
Stanley's Lectures on the Eastern Church. Intro. by A. J. Grieve. 251
,, Memorials of Canterbury. 89
Tacitus. Vol. I Annals. Introduction by E. H. Blakeney. 273
,, Vol. II. Agricola and Germania. Intro. by E. H. Blakeney. 274
Thierry's Norman Conquest. Intro. by J. A. Price, B.A. 2 vols. 198–9
Villehardouin and De Joinville's Chronicles of the Crusades. Translated with Introduction, by Sir F. Marzials, C.B. 333
Voltaire's Age of Louis XIV. Translated by Martyn P. Pollack. 780

ORATORY

L Anthology of British Historical Speeches and Orations. Compiled by Ernest Rhys. 714
Bright's (John) Speeches. Selected with Intro. by Joseph Sturge. 252
Burke's American Speeches and Letters. 340
(*See also* ESSAYS)
Demosthenes: Select Orations. 546
Fox (Charles James): Speeches (French Revolutionary War Period). Edited with Introduction by Irene Cooper Willis, M.A. 759
Lincoln's Speeches, etc. Intro. by the Rt. Hon. James Bryce. 206
(*See also* BIOGRAPHY)
Macaulay's Speeches on Politics and Literature. 399
(*See also* ESSAYS *and* HISTORY)
Pitt's Orations on the War with France. 145

PHILOSOPHY AND THEOLOGY

L A Kempis' Imitation of Christ. 484
Ancient Hebrew Literature. Being the Old Testament and Apocrypha Arranged by the Rev. R. B. Taylor. 4 vols. 253–6
Aristotle, The Nicomachean Ethics of. Translated by D. P. Chase. Introduction by Professor J. A. Smith. 547
(*See also* CLASSICAL)
Bacon's The Advancement of Learning. 719
(*See also* ESSAYS)
Berkeley's (Bishop) Principles of Human Knowledge, New Theory of Vision. With Introduction by A. D. Lindsay. 483
Boehme's (Jacob) The Signature of All Things, with Other Writings. Introduction by Clifford Bax. 569
Browne's Religio Medici, etc. Introduction by Professor C. H. Herford. 92
Bunyan's Grace Abounding and Mr. Badman. Introduction by G. B. Harrison. 815 (*See also* ROMANCE)
Burton's (Robert) Anatomy of Melancholy. Introduction by Holbrook Jackson. 3 vols. 886–8
Butler's Analogy of Religion. Introduction by Rev. Ronald Bayne. 90
Descartes' (Rene) A Discourse on Method. Translated by Professor John Veitch. Introduction by A. D. Lindsay. 570
Gore's The Philosophy of the Good Life. 924
Hobbes' Leviathan. Edited, with Intro. by A. D. Lindsay, M.A. 691
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L Koran, The. Rodwell's Translation. 380
Latimer's Sermons. Introduction by Canon Beeching. 40
Law's Serious Call to a Devout and Holy Life. 91
Leibniz's Philosophical Writings Selected and trans. by Mary Morris. Introduction by C. R. Morris, M.A. 905
Locke's Two Treatises of Civil Government. Introduction by Professor William S. Carpenter. 751
Malthus on the Principles of Population. 2 vols. 692–3
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Mill's (John Stuart) Utilitarianism, Liberty, Representative Government. With Introduction by A. D. Lindsay. 482
„ Subjection of Women. (*See* Wollstonecraft, Mary, *under* SCIENCE.)
More's Utopia. Introduction by Judge O'Hagan. 461
L New Testament. Arranged in the order in which the books came to the Christians of the First Century. 93
Newman's Apologia pro Vita Sua. Intro. by Dr. Charles Sarolea. 636 (*See also* ESSAYS)
Nietzsche's Thus Spake Zarathustra. Translated by A. Tille and M. M. Bozman. 892
Paine's Rights of Man. Introduction by G. J. Holyoake. 718
Pascal's Pensées. Translated by W. F. Trotter. Introduction by T. S. Eliot. 874
L Ramayana and the Mahabharata, The. Translated by Romesh Dutt, C.I.E. 403
Renan's Life of Jesus. Introduction by Right Rev. Chas. Gore, D.D. 805
Robertson's (F. W.) Sermons on Religion and Life, Christian Doctrine, and Bible Subjects. Each Volume with Introduction by Canon Burnett. 3 vols. 37–9
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Ronssean's (J. J.) The Social Contract, etc. 660 (*See also* ESSAYS)
L St. Augustine's Confessions. Dr. Pusey's Translation. 200
L St. Francis: The Little Flowers, and The Life of St. Francis. 485
Seeley's Ecce Homo. Introduction by Sir Oliver Lodge. 305
Spinoza's Ethics, etc. Translated by Andrew J. Boyle. With Introduction by Professor Santayana. 481
Swedenborg's (Emmanuel) Heaven and Hell. 379
„ „ The Divine Love and Wisdom. 635
„ „ The Divine Providence. 658
L „ „ The True Christian Religion. 893

POETRY AND DRAMA

Anglo-Saxon Poetry. Edited by Professor R. K. Gordon. 794
L Arnold's (Matthew) Poems, 1840–66, including Thyrsis. 334
L Ballads, A Book of British. Selected by R. B. Johnson. 572
Beaumont and Fletcher, The Select Plays of. Introduction by Professor Baker, of Harvard University. 506
Björnson's Plays. Vol. I. The Newly Married Couple, Leonardo, A Gauntlet. Translated by R. Farquharson Sharp. 625
„ „ Vol. II. The Editor, The Bankrupt, and The King. Translated by R. Farquharson Sharp. 696
Blake's Poems and Prophecies. Introduction by Max Plowman. 792
L Browning's Poems, 1833–44. Introduction by Arthur Waugh. 41
L Browning's Poems, 1844–64. 42
L „ The Ring and the Book. Intro. by Chas. W. Hodell. 502
L Burns' Poems and Songs. Introduction by J. Douglas. 94
Byron's Poetical and Dramatic Works. 3 vols. 486–8
Calderon: Six Plays, translated by Edward Fitzgerald. 819
L Chaucer's Canterbury Tales. Edited by Principal Burrell, M.A. 307
Coleridge, Golden Book of. Edited by Stopford A. Brooke. 43 (*See also* ESSAYS)
Cowper (William). Poems of. Edited by H. I'Anson Fausset. 872 (*See also* BIOGRAPHY)
L Dante's Divine Comedy (Cary's Translation). Specially edited by Edmund Gardner. 308
Donne's Poems. Edited by H. I'Anson Fausset. 867
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Eighteenth-Century Plays. Edited by John Hampden. 818

Emerson's Poems. Introduction by Professor Bakewell, Yale, U.S.A. 715
Everyman and other Interludes, including eight Miracle Plays. Edited by Ernest Rhys. 381
L Fitzgerald's (Edward) Omar Khayyam and Six Plays of Calderon. 819
L Goethe's Faust. Parts I and II. Trans. and Intro. by A. G. Latham. 335
(*See also* ESSAYS *and* FICTION) [well. 921
Golden Book of Modern English Poetry, The. Edited by Thomas Cald-
L Golden Treasury of Longer Poems, The. Edited by Ernest Rhys. 746
L Goldsmith's Poems and Plays. Introduction by Austin Dobson. 415
(*See also* ESSAYS *and* FICTION)
Gray's Poems and Letters. Introduction by John Drinkwater. 628
Hebbel's Plays. Translated with an Introduction by Dr. C. K. Allen. 694
Heine: Prose and Poetry. 911
Herbert's Temple. Introduction by Edward Thomas. 309
Heroic Verse, A Volume of. Arranged by Arthur Burrell, M.A. 574
Herrick's Hesperides and Noble Numbers. Intro. by Ernest Rhys. 310
L Ibsen's Brand. Translated by F. E. Garrett. 716
L „ Ghosts, The Warriors at Helgeland, and An Enemy of the People. Translated by R. Farquharson Sharp. 552
L „ Lady Inger of Ostraat, Love's Comedy, and The League of Youth. Translated by R. Farquharson Sharp. 729
L „ Peer Gynt. Translated by R. Farquharson Sharp. 747
L „ A Doll's House, The Wild Duck, and The Lady from the Sea. Translated by R. Farquharson Sharp. 494
L „ The Pretenders, Pillars of Society, and Rosmersholm. Translated by R. Farquharson Sharp. 659
Jonson's (Ben) Plays. Introduction by Professor Schelling. 2 vols. 489–90
Kalidasa: Sbakuntala. Translated by Professor A. W. Ryder. 629
L Keats' Poems. 101
Kingsley's (Charles) Poems. Introduction by Ernest Rhys. 793
(*See also* FICTION *and* FOR YOUNG PEOPLE)
L Langland's (William) Piers Plowman. 571
Lessing's Laocoön, Minna von Barnhelm, and Nathan the Wise. 843
L Longfellow's Poems. Introduction by Katherine Tynan. 382
L Marlowe's Plays and Poems. Introduction by Edward Thomas. 383
L Milton's Poems. Introduction by W. H. D. Rouse. 384
(*See also* ESSAYS)
Minor Elizabethan Drama. Vol. I. Tragedy. Selected, with Introduction. by Professor Thorndike. Vol. II. Comedy. 491–2
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Percy's Reliques of Ancient English Poetry. 2 vols. 148–9
Poe's (Edgar Allan) Poems and Essays. Intro. by Andrew Lang. 791
(*See also* FICTION)
Pope (Alexander): Collected Poems. Introduction by Ernest Rhys. 760
Procter's (Adelaide A.) Legends and Lyrics. 150
Restoration Plays, A Volume of. Introduction by Edmund Gosse. 604
L Rossetti's Poems and Translations. Introduction by E. G. Gardner. 627
Scott's Poems and Plays. Intro. by Andrew Lang. 2 vols. 550–1
(*See also* BIOGRAPHY *and* FICTION)
L Shakespeare's Comedies. 153
L „ Historical Plays, Poems, and Sonnets. 154
L „ Tragedies. 155
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Spenser's Faerie Queene. Intro. by Prof. J. W. Hales. 2 vols. 443–4
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Stevenson's Poems—A Child's Garden of Verses, Underwoods, Songs of Travel, Ballads. 768
(*See also* ESSAYS, FICTION, *and* TRAVEL)
L Tennyson's Poems. Vol. I, 1830–56. Introduction by Ernest Rhys. 44
L „ „ Vol. II, 1857–70. 626 [Harrison. 899
Webster and Ford. Plays. Selected, with Introduction, by Dr. G. B.
L Whitman's (Walt) Leaves of Grass (I), Democratic Vistas, etc. 573
Wilde (Oscar), Plays, Prose Writings and Poems. 858
L Wordsworth's Shorter Poems. Introduction by Ernest Rhys. 203
L „ Longer Poems. Note by Editor. 311

REFERENCE

Atlas of Ancient and Classical Geography. Many coloured and line Maps; Historical Gazetteer, Index, etc. 451
Biographical Dictionary of English Literature. 449
Biographical Dictionary of Foreign Literature. 900
Dates, Dictionary of. 554
Dictionary of Quotations and Proverbs. 2 vols. 809–10.
Everyman's English Dictionary. 776
Literary and Historical Atlas. I. Europe. Many coloured and line Maps; full Index and Gazetteer. 496
" " " II. America. Do. 553
" " " III. Asia. Do. 633
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